MARRIED LIFE

A

Family Handbook

By
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DEDICATED

This Book is dedicated to the Married and all those who desire to assist in the promulgation and dissemination of principles conducive to the well-being of the human race.

Remembering that each man and woman has a place to fill in this world and may be of great worth by observing natural law and duties one to another—thereby deserving the salutation—"Peace to Men of Good Will."

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PREFACE.

This book is in the main addressed to the thoughtful, though especially to the married, to parents and those who are of marriageable age, or rather those who contemplate entering the married state.

Perhaps none have more abundant opportunities to study married life than the physician. He becomes acquainted with conditions and needs, the supplying of which not only would benefit them, but their children from the social and physical aspect of society.

The physician becomes, to a certain extent, an honorary member of the family he attends, and sees people in a very different light from that which other people see them.

He becomes the repository of all kinds of moral and physical errors and secrets, to them and to him, equally sacred, and is by him kept with professional fidelity.

The author's object, therefore, is to impart such instruction as would be useful—this in a short, concise way, to suit the busy individual who has not the time to wade through the numerous and larger works that contain much that is useful, but at the same time, much that is superfluous, and little or nothing on some of the most important phases of the human family in social and sexual life—knowledge so important to health and welfare of the people.

It is this that these pages at least attempt to do, and hope to do so, as plainly as possible; trusting it will be read in the same spirit in which it is written, and do some good in a wide community.

Considering all things rightfully may it be said: "Be not ashamed to know that which God was not ashamed to create."

It's Nature's failing to overlook,
The essential needs of life;
And by blundering on in ignorance
Court disease and pain and strife.

For the neglect of education
Upon certain lines of thought
We get unnecessary suffering
Which is very dearly bought.

Such could easily be avoided
By the ones who mould our ways.
Let's profit by their experience
Whose years number as our days.

Now, we should learn to live and control
Our passions of greed and thought,
And use strong will-power to guard our ways
Ere our strivings count for naught.

Cleanliness in thought and mind
Should be our constant study.
"Early to bed and early to rise,"
Will paint our cheeks most ruddy.

Now to control our sexual passion
With Temptations nude and bare,
Requires a strong Will, as of iron,
Which we are forced to declare.

Practice temperance thro' all your life.
From bad company steer clear—
Don't crave, but that which comes honestly
Or thy chance you'll steal I fear.

Remember Him who created you
Who is ever good and kind.
Aim to be like Him all through life
Then, true happiness you'll find.

INTRODUCTION.

Naturally: The family is the foundation of all Society.

The source of the natural family, is the conjugal union of one man and one woman, which in turn forms a home.

Towns, Cities and Nations are composed of groups of families, and marriage gives us the family and the natural home.

One of the strongest forces in human nature is love, love of God, love of self and love of neighbor.

And among these stands out with special prominence that love which impels man and woman in the flower of their youth to single out a member of the other sex as the object of an affection that makes them leave their father's and mother's home, to unite their destinies in a new home, consecrating their love by passing on to others, the precious spark of life which they themselves have received.

This state of life arises from an agreement by which two persons, a man and a woman, bind themselves to live together in a staple union until death, and is called the married state.

As the Home So the State.

Upon marriage depends the home, which will be happy or miserable according to what marriage and married life makes it; and upon this depends the ultimate tranquillity or misery of the nation.

The home contains the Cradle as well as the first and best school for the individual.

No training or influence equals that of the home, which is the foundation of all that is good and great in this world.

It is self-evident, therefore, that upon the condition of the home circle depends the weal or woe of the individual as well as that of mankind in general.

Marriage is not something invented by man, it is the institution of nature, and as such, its character is made clear to all men by the natural law.

Men and women are free to enter the married state or not. There is no obligation of taking a wife or a husband. But when a man and a woman promise to take each other for husband and wife, naturally, they must accept all the conditions and duties of matrimony which have been prescribed by God.

If they accept its privileges, they must accept its obligations.

STUDY OF MARRIED LIFE.

The Foundation of the Family and of Society.

What should concern the individual more than family life?

What, then, should be more important than proper knowledge as to how it be conducted?

Remember, we know only those things which we learn from teachers, or by experience.

Why should we have text-books and need instruction on all things except those pertaining to family life—the most important to the human race?

Many mistakes would be avoided if young men and young women would study the subjects pertaining to family life before marriage. Yes, before they engage to be married.

Parents should study family life so that they may be able to help their children in this very important study.

ARE WE "OUR BROTHER'S KEEPER?"

Yes, to a certain extent. If we would live an ideal life, we must have pleasant environments. Much depends upon the neighbor's home life, in which to some extent, we ourselves are interested.

There is no place where so much can be accomplished for the betterment of the people as in the home.

If our neighbors rear good and healthy boys and

girls, then the members of our family are liable to obtain good and healthy husbands and wives.

Therefore, it is but natural that fathers and mothers should be interested in their neighbors, especially in their civic and moral training.

One of the most important questions in our time is instruction to parents on training their children—an art which few learn.

Young people need instruction on courtship. Improper courtship is the root of most disappointments in married life. Ask your family physician about this if you are in doubt of this truth.

When a son or a daughter thinks parents, or their spiritual advisers are too strict, it may be advisable to refer them to what an experienced physician says about those matters.

"If my parents had instructed me on such questions I would not be in this condition," says one otherwise well educated.

"Ignorance in things pertaining to family life is the cause of most of my marital disappointments," says another.

If their is one branch of instruction that is of greater importance to the human race than another, it is that of instruction on Married life.

TRAINING OF CHILDREN.

Man is the only creature that must be trained by its parents, and needs instruction on all phases of life.

And, upon this training, in the main, depends the intelligence of the family.

It is for this reason that the author outlines not only an ordinary routine for training children, but dwells quite fully on the necessity of training the mental and physical deficiencies.

It is wonderful how much the mother and father can do to improve the mental and physical qualities of their children when the proper efforts are employed.

"As the twig is bent, so the tree will grow."

A family hand book is not complete without due instruction on medical and physical problems that are ordinarily met with in the family.

While there should be no attempt to replace the family physician there is not only room, but an absolute necessity of ample instruction on various phases of medical and physical needs for the family, things that come up almost daily.

In this the author has not only included a well regulated treatise on ordinary diseases met with in the family, but provides instructions that will enable the family to prevent many of the most dangerous diseases and ailments, that are met with in the family so frequently.

The instructions and directions are written in plain language, available to the laity, so that they may be grasped by all who read them.

HOW TO MAKE THIS BOOK PROFITABLE AND DERIVE THE GREATEST BENEFIT FROM IT.

When a professional man receives a new Text-Book he reads it carefully, and so becomes acquainted with its contents. Then he can readily find and read up on any subject he may desire.

This being a book of this kind, it should be read and studied in this manner.

CHAPTER I.

Marriage and Those Who Are Marriageable.

Foundation of society.

THE family of course is the foundation of society.

Hence, the well-being of society depends upon the purity and integrity of marriage. Even from the stand-point of a physician. If the married state would be a happy one, both parties should be not only as far as possible of the same condition in life, but also of similar religious convictions.

Tastes, likes and dislikes.

Their tastes, likes and dislikes, choice of friends, manner of life, etc., should be near as possible alike.

It is not congenial to have one companion deeply religious, while the other ridicules religion as a whole, or that form of religion.

In making a selection, the counsel of parents and good friends should not be altogether disregarded.

Engage not in haste.

The engagement should not be made in a hurry, for it is binding in conscience, and is not easily retracted even if later found unsuitable.

We should keep in mind that the nature of marriage requires that there should be no marriage without the true affections. Experience teaches that the disregard of this natural law results too often in physical and moral failure—deplorable not only for the contracting parties, but their children and society.

Now the question arises:

Who should marry?

Who should marry?

First of all—those only, who are of proper age. Those who marry at a tender age are not fitted for marriage—physically nor mentally.

There can be no fast line drawn, but, as a rule the maiden's physical development is not sufficient under eighteen or twenty years of age.

The man should be twenty-one or more; as he is the provider for the home and requires more time to fit himself for such a responsibility.

Secondly:—Those who are undoubtedly in love with one another, and are by natural law fitted for each other and for that state of life.

Test for love.

What may be considered as a test that they are so in love?

First:—A ready willingness or desire to renew an engagement after it has been broken off. We must make a distinction between fancy and love—it is in this that so many make mistakes—they fancy that they truly like one another—this may be true, but this alone is not love.

Second:—Though beset with importunities of others who would seek her favor, she is constant to her choice in his absence as truly as though present; this is a test of true love.

Must be free and unbiased to prove true love.

Rivalry of another for the same woman or the same man may cause a false or apparent love, each trying to obtain the attention of the same girl or man prevents free and unbiased thought and consideration to prove true love. And absence from each other at the same time mingling with others of the opposite sex and yet, retain the same preference for the chosen one, may be considered a fair conclusion that their affection for one another is lasting.

Learn the natural law and purpose of married life.

The next point of importance is that those contemplating marriage should inform themselves, with right ideas as to the law and purpose of married life. Whether they are of proper health and physical condition to enable them to carry out the responsibilities and obligations of the married state. This is no more than

common sense should teach us, and its importance cannot be over-estimated.

Health is required for future happiness.

Those who are not healthy and not able to provide for a family should not think of marriage.

A sickly husband cannot provide for a wife and family, and a sickly wife cannot perform her duties toward her husband and children or her home; and these are things that are not cheerful to contemplate.

Position in life a factor.

Moreover, they should possess a knowledge of what position in life one wishes to, or is likely to fill; in other words, a choice of occupation is another important factor.

"Choose your place in life, before you choose your wife."

Know the best and worst of each other.

Try to have opportunity to know the best and worst of each other. It is too late to find fault with one another after marriage. If such faults are discovered before, they can decide whether they are bearable or not, and if they then conclude to marry they have no excuse or right to find fault—of course that does not mean the faulty should not endeavor to correct such faults; for, such can in nearly if not all instances be overcome by watchfulness and effort to the great joy and benefit of spouse and children.

Trials and tribulations.

Only those who have for one another an affection which will bear the foregoing and similar trials or tests, are by natural law fitted or safe to anticipate in a happy married life.

Such will not seek divorce.

Such then, will not ask or seek for opportunity of easy divorce; the thought of which to them in an abhorrence.

When law and society will give warning that marriage is indissoluble, and when society proclaims that only a union which desires to be for life, is natural; many

of the most glaring physical and social evils of society will disappear.

Mismates are the chief cause for so much trouble and much of crime.

It is the mismating and mistakes in marriage that cause so much misery, and most of all which could be avoided. This also pertains to the increasing number of fatherless, motherless and sickly children.

Divorce is causing crimes of most all kinds, but especially such as suicide and homicide, vastly more numerous than the average statistician dares to acknowledge or state.

Avoid hasty marriage then society will not be forced to bear the burden.

To avoid these and similar consequences it seems plain that those who rush into marriage of convenience and heedlessness, and afterwards discover their mistake must, in justice, bear the weight of their folly, and not throw the burden of it upon society.

To sum up this chapter, let it be said; "In order to be well fitted for marriage, both parties should be healthy, properly formed, and well able to control themselves in temper, and their lives should show traits of character that will make an attractive home, which will conduce to each other's comfort and welfare.

Prove one another's fitness before marriage.

They should be of approved age, physical and social conditions, and that their love for each other is true love.

Every one contemplating marriage should consider well, that all natural means are used to bring about a well mated marriage.

Characteristics to be avoided.

Avoid what is called the "ruffianly style dress", or slouchy appearance. A well dressed man does not require an extensive wardrobe. He does not need a different suit for every season and every occasion, but if he is care-

ful to select clothes that are simple and not striking or conspicuous, he may use the garments over again without being noticed, provided they are suitable to the season and the occasion.

A clean shirt, collar and cuffs always make a young man look neat and tidy, even if his clothes are not of the latest pattern and are somewhat threadbare.

Compare a well-dressed body with a well-balanced mind, a taste for dress with a taste for knowledge, culture, virtue and piety.

When a woman goes by in plain, neat apparel, it is the presumption that she has fair expectations, and a husband that can show a balance in his favor. For women are like books; too much gilding makes men suspicious that the binding is the most important part.

A man who is attracted by a woman's extravagance in dress, her plumes, face paint and gewgaws, will prove to be a dangerous husband—he will most likely be attracted by other women after marriage.

See Marriage "don'ts" on last page—Proverbs page 420.

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At the base of all life are two instincts—Self-preservation and procreation. Without these, all life would perish from the face of the earth.

CHAPTER II.

Impediments to Marriage.

God sends the affinity.

"MARRIAGES are made in heaven," is true although poetic.

Rightly studied we observe that God sends to those who should marry the double gift of a supreme, a permanent affection for some person and an opportunity to consummate the same in marriage.

By natural law there is an affinity—an attachment of one person to another, to the exclusion of all other persons, and by watchful efforts these will have opportunities to meet. Therefore the phrase; "I have not yet met my affinity."

But such a supreme affection and attachment can only exist between two.

Love at sight a failure.

Lest some would be misled, let us say, that, not every apparent affinity (spontaneous love), is true love; that is proven to be so, by so many of the "Love at Sight Marriages" that terminate in deplorable failures.

God does not send these gifts haphazardly. They are natural forces and are actually Divine.

Natural laws are God's laws, and the two are not separate but one; so that those who when speaking of natural law do not regard it as Divine, are unscientific. Hence, it may be said without danger of disloyalty to the scientific view, that naturally, when two persons are so brought together, all other things being equal, that should be looked upon as a Divine indication that a new home should be founded.

Removable obstacles and impediments.

But after all there may be obstacles, or impediments, that are also natural and must be heeded.

Support of a home for example, is also a natural law. No matter how well a pair may love, and suit each other, the inability to support a family is an impediment to that marriage, and according to all law and common sense they should not marry until after obstacles are removed.

And again; society as at present organized throws many inexcusable obstacles in the way of creating a new home.

Among these natural but in many instances removable impediments are the following:

Unnecessary expensive living; mistaken social pride; low salaries; unwise parental interference; lack of opportunity for proper acquaintance of suitable persons; temporary illness; and disease which might infect the other party.

Hereditary diseases.

A history of hereditary diseases, such as consumption, syphilis, insanity, cancer, etc. While they may not with certainty be transmissible from one generation to the other, and may even have been eradicated, should be made known to the other party before engagement to marry, then when in the face of that they should agree to marry, there can be no complaint of deception in that respect.

Infectious diseases must first be eradicated.

And in regard to social diseases, which are more serious than any other. If the one who was once so infected is sure that he, or she has been fully cured, need not necessarily be spoken of to his or her prospective spouse.

But, by all means, let it be understood—that no man marry unless he is sure that he has been fully cured from a disease which he had contracted through sexual lust; especially that of gonorrhea. This being a contagious catarrhal inflammation of the mucus membrane of the genital organs, and is a disease that should never be attempted to be treated by any one except a physician or under his direction.

It is because of self-treatment, or treatment with advertised remedies, and remedies furnished by druggists without a physician's instruction and observation, that cause so many men, men who think they are cured, infect their innocent wives.

These poor women become invalids, and in many cases never entirely recover. It is a deplorable fact, that by far the greatest number of all female diseases requiring surgical operation, were caused by infection from their husbands.

Therefore, any man who has been afflicted with such disease should not attempt to marry unless he submit to a critical examination by a reputable physician, who should observe him for at least six months after the time of a supposed cure; even if the physician who treated him for such disease, has given him the assurance that he was cured of that disease.

If that physician after having the patient under observation gives him the assurance that he is free from gonorrhea, he may feel safe to marry.

Mistakes of young men.

The mistakes that many young men make after being infected, is when they try to "cure" themselves, or, go to a quack doctor who offers to cure for a certain price. When that quack has treated the infected man to the extent of the price paid, the patient is dismissed as cured, or is furnished with some medicine with which the patient is to treat himself.

This disease is due to natural law.

The purulent (pus) discharge apparently stops, he goes on, and finally marries and infects his pure and innocent wife.

Let it be said; that these diseases are due also to a natural (Divine) law.

The price — the penalty — consequences are grave.

The price—the penalty for a practice that men of sense know is forbidden.

The consequences of such trans-

gressions, are grave, as the misdeed is a transgression against natural law.

Not only are the poor women caused to endure an immeasurable suffering from this disease, but, often their children are infected.

The enormity of which may be realized when it is said that nine out of every ten of the blind are caused by being infected during birth from the germs in the birth canal.

Syphilies should observe equal precaution.

Those suffering from syphilis, should observe the same precaution.

They should undergo a course of treatment, and not until after they are sure they are free from the disease should they marry.

When you think of marrying, think not only of yourself, but also of the children that naturally are expected to be born; have in mind that you will not bring a family of sickly children into the world; better never marry—you cannot be happy in life with such a burden, and to anticipate a sickly family is no pleasure. One can get along in this world when alone—but when others depend upon him the proposition is more grave.

Impediments which are seldom removable.

The impediments to marriage we have so far dwelt upon can be removed by proper remedies, so that they will not be obstacles to marriage.

We now shall speak of some impediments that are seldom removable, and these are as follows:

Difference in religious faith; chronic alcoholism; the insane; the degenerate; the imbecile; including such that are deformed so that in case of conception would not be able to give birth to a child.

Those in doubt should be examined — Religious differences.

If there is any doubt in a case, the respective party should submit to medical examination before concluding to marry.

Religious differences, by some are not

considered as obstacles to marriage, but those who have made a study of this are unanimous in the opinion that it is a most formidable obstacle to family unity, and the normal training of their children in the vast majority of such marriages. For the good of the prospective parties, as well as for society; mixed marriages should be avoided.

Alcoholics and narcotics should not marry.

Chronic Alcoholics should not marry until after they are sure that they will never misuse intoxicating drinks. True, alcoholism can be overcome, and that one can quit the habit whenever he or she wants to do so; but, one who will not do so before marriage will seldom give it up after.

Narcotics are even less fitted to marry, and should be avoided if not prohibited by LAW.

The insane, weak-minded, and degenerate should never marry.

Insanity is an impediment that is, or should be a bar to marriage; no insane or even weak-minided person should ever marry.

Physical degenerates, should not marry; one who is in a state of decay—so to speak, or has not properly developed, is not a fit subject to marry.

Moral degenates, are equally if not more unfit for that state in life. One who is a criminal or even men or women of bad character should not marry; such will only be a menace to humanity; and their offspring usually becomes a burden to society.

The imbecile, the feeble-minded, and the weakling of course has no claim to take such a step.

Epileptics, are unfit for marriage, no matter how mild the disease may be, because that disease tends to become worse, and may finally end in insanity, besides the offspring may inherit that disease.

Ability to perform the duties of this state is required.

All those who are not able to perform the duties and obligations of the married state, are ineligible to marriage. This includes the deformed; so that in case of

conception the mother would not be able to give birth to the child.

Every one contemplating marriage should consider well, that all lawful means are used to bring about a natural marriage.

The inherent penalty of an unnatural marriage may be fitly characterized as the "Hottest human Gehenna on this Earth."

There is an Old Hindu legend in which creation of the first woman is described thus:

When the creator Twashtri had made man he gathered together a million of contradictory elements, and out of them he made a woman. After eight days the man became dissatisfied.

"My Lord," he said, "the *creature* you gave me poisons my existence. She babbles unceasingly, she takes all my time, she grumbles at nothing, and is always ill."

So Twashtri took the woman away. But after another eight days, the man became again uneasy.

"My Lord," he said, "my life is very solitary since I returned this creature." So Twashtri gave him the woman back again. This time, however, only three days had gone when the man came once more to the Lord.

"My Lord," he said, "I do not know how it is, but somehow the woman gives me more annoyance than pleasure. I beg of you to take her away."

But Twashtri would not.

"Go and do your best," he said.

"But I cannot live with her," cried the man.

"Neither can you live without her," cried the Creator

"Woe is mine!" mourned the man, "I can neither live with nor without her."

Since this story was written thousands have felt the conflicting experience which the story expresses.

The underlying truth is that man and woman at the time they join in matrimony, neither are perfect.

It is their mutual life and constant adjustment of mind

and heart, under the influence and obedience to the Christian Law of Matrimony that is to make them perfect.

Married people can live happily with one another even when not matched perfectly; where there is a will there is a way.

Do right though pain and anguish be thy lot,
Thy heart will cheer thee when the pain's forgot,
Do wrong for pleasure's sake then count thy gain,
The pleasures soon depart; the sin remain.

CHAPTER III.

The Selection in Marriage.

Mode of selection in marriage.

WHEN considered in the rational and from the physiological basis, those who contemplate marriage will observe the following rules of selection.

1st.—They should be of approved age; physical and social condition.

2nd.—They should be of the same religious convictions, tastes, likes and dislikes.

3rd.—They should have a devoted and supreme affection for one another.

4th.—They should be as nearly equal in social position as possible—if any difference let the husband be superior to the wife; especially intellectually.

What Nature teaches.

If Nature teaches anything, it is what observation and experience has proven to be correct: that when husband and wife are properly matched the husband presents the positive—the physical force, the intellectual, and strongly loving; while the wife will represent the negative—the sympathetic, the spiritual, affectional temperamental.

The husband is to be the provider and protector of the family, and thus both will be in their proper sphere, he exercising the prerogative which naturally belongs to the guardian and protector, and she in her confidence, love and respect for her companion, whom she can implicitly trust.

Peculiarities that may be observed in the selection.

In our quest for the selection of a life partner it will be well to consider the observance of natural peculiarities that exist in the make-up of individuals that are suitable for each other.

There are signs and indications, both, of mental and physical forces in the features and stature of the individual, by which many traits may be observed, that help in the selection of character, physical qualities and temperament of persons; also such that may be considered with a view to retain or improve the quality of the race.

Authors of experience and observation suggest the following marks and peculiarities as a good rule to be carried out.

Timely suggestions.

They should be, "Those, who are neither very tall nor very short; whose eyes are neither very black nor very blue; whose hair is neither very black nor very red; the mixed types, may marry those who are quite similar in form, complexion and temperament to themselves.

Bright red hair and florid complexion indicate an excitable temperament; such may be modified by marrying the jet black hair and brunette type.

The blue, black, gray, or hazel eyes, should not be mated with those of the same color.

Where the color is very pronounced, the union should be with those of a quite different color.

The very corpulent should unite with the slender, and the short thick with those of a different constitution. The thin, long prominent featured, the roman-nosed, the cold-blooded, should choose the round-featured, warm-blooded and emotional.

The extremely irritable and nervous had better unite with the lymphatic—the slow and quiet. Thus the stolid will be prompted by the nervous companion, while the excitable will be quieted by the gentleness of the less nervous.

The quick-notioned, rapid-speaking person should marry the calm and deliberate.

The very fine-haired, soft and delicate-skinned should not be united with those like themselves; and the curly should choose those with straight and smooth hair. The

flat-nosed should unite with the full roman-nosed; the thin long-faced better with the round-faced. The man who inherits the features and peculiarities of his mother, should marry a woman who partakes of the characteristics of her father; but in all cases where the type is not pronounced, but medium, may marry either. The blue-lipped should choose those of lighter or pink lips.

With many it may be asked;."Is it the best to confine young people to keep company with only one girl or one man during their time of selection?

The young people should have mixed company.

"No, in order to enable young people to make intelligent choice for life companions, they should not have 'steady' company until after they have had mixed company sufficient to enable them to have some experience, and acquaintance with various ones of the opposite sex.

"Young men and young ladies should be taken to parties, mingle with mixed company, and receive company in groups, before entertaining regular company with matrimony in view.

"Parents, or elders should act as chaperons, fathers and mothers should take them to gatherings, and so lead them aright.

"This is reasonable; this is the way to pave the way for a judicious choice.

"How does a young man or woman know whether or not he or she is able to choose if they have associated with but one man or one woman?"

CHAPTER IV.

Puberty.

Growing into manhood and womanhood.

PUBERTY is that period of life when the young individual is developing and maturing into adult life. When they become capable of begetting or bearing children.

In temporate climates this occurs in the human male at the age of thirteen to sixteen, and in the female at the age of twelve to fifteen years.

In warm and very cold climates it takes place somewhat earlier.

What changes take place in the female at puberty?

The mammary glands (the breasts), are developed, her body fills out, the contour becomes rounded and more graceful, hair appears on the pubes and armpits, the character changes, she develops into womanhood; the catamenia appears—a discharging of blood from the womb; at this time is first seen, and recurs when the normal condition about every twenty-eight days; hence it is known as the monthly period of flow.

The menstruation.

What is the character of the flow?

At first it is pale consisting of mucus (slime), with slight amount of blood; later on it becomes bright red and finally, at the close of the period it lessens in quantity, and becomes pale again.

The duration is generally from three to five days. There are cases in which menstruation occurs every three, five or even six weeks, and when this is the case, and continues so for years, it is regular, and which ever of such time it is, that becomes the regular time in which it occurs, or the regular menstrual period of that woman.

Does menstruation occur during pregnancy?

No, except in rare cases, and in abnormal conditions

—its appearance is cause of alarm, and a physician should be consulted.

Should girls during the age of development into womanhood have special attention from their parents?

Yes; when the girl reaches the age of where she begins to develop into womanhood, the parents or guardians should take a special interest in her. They should observe her in every way or phase of her life; her physical development, and general condition of health; see that all her organs are functionating properly—her organs of elimination, the mouth, stomach, bowels, and kidneys; and her genital parts—the breasts, vulva and vagina.

Girls to be informed by their parents.

Her mother, or father or some proper person should apprise her of the changes that are about to take place, and how to conduct herself at this time.

She should be instructed, at this time, how to take care of herself—do not leave this to her older companions who themselves only have a vague idea of what is correct.

Her breasts should have special attention — their growth.

Attention to her breasts; many girls at this period of life feel timid; and try to hide the development of their breasts—and wear tight waists and so depress the nipples which prevents their growth. This can be prevented by instruction to let them stand out.

Others are instructed by their playmates or companions—who tell them how to prevent the monthly flow —usually by washing in cold water. This has injured many girls who then suffer for years, and some never recover their health.

If the girl is in normal health, and does not abuse or neglect herself in any way, she will seldom have trouble, and will develop a healthy adult life. See that she eats right. See that she sleeps right and at the right time. The girl needs regular habits and proper rest at nights. The best time is from nine P. M. to five A. M.

The age of danger.

This is the age of danger—of physical and moral injury.

It is at this age in which she is easily excited—especially sexually; she should be guarded as to her company with the opposite sex; and it is at this time she needs confidential and guarded advice of mother and father. These instructions properly carried out—girls so instructed and guarded, usually turn out well, and are a pleasure and comfort to the parents, and honor to society. It is then, and then only that we can hope for pure and healthy womanhood.

"A wise father gives counsel to his children.
He always has in mind their welfare, and does not shirk this duty because of false modesty."

CHAPTER V.

Physiological Anatomy and Function of the Female Organs.

THE nature of married life almost requires that both the husband and the wife possess at least a rudimentary knowledge of the female organs and their respective functions, to enable them to detect ordinary deformities; abnormal conditions and disorders; so that they may be able to provide timely attention and assistance.

The Pelvis.

The Pelvis is a bowl-shaped bony structure of the lower extremity of the body, closing the lower part of the abdominal body; or cavity of the human body.

The Pelvis of the female contains the generative or reproductive and principal excretory organs; which for convenience are divided into internal and external organs, with their appendages.

Namely:—The internal are: the Bladder, Urethra, Rectum, Uterus or womb, Ovaries, Ovarian tubes; their ligaments, and the Vagina.

The external are: the Anus, Meatus, or opening of the bladder, and the Vulva.

The soft or fleshy parts within the pelvis, the various pelvic muscles; and other tissues forming what is termed the pelvic floor or diaphragm; consists of a thick fleshy elastic layer of tissue; dove-tailed all around the lower bony structure of the pelvic outlet.

Through this pelvic floor extend the rectum surrounded by a muscular structure comprising the perineum and sphincture-ani; the vagina and urethra.

The vagina is closed by the minor and major labias of the vulva, with the vulvo-vaginal glands.

What is the vagina and its functions?

Functions of female organs.

The vagina is a cylindrical membranous canal of elastic tissue, lying between the rectum, and the bladder, and the urethra; extending from the vulva to the uterus, conforming to the axis of the pelvis, and outlet.

Its functions are to carry off the excretions from the uterus, and to serve as the organ of copulation and parturition.

What is the Uterus, its functions and appendages?

The Uterus or womb, is the organ of gestation; a hollow, pear-shaped muscular organ situated in the pelvis between the bladder and rectum. Its functions are those of gestation and parturition. Its appendages are: the ovarian ligaments, tubes; ovaries, vagina, and the round ligaments. The main opening or mouth of the uterus, encircled by and opens into the vagina.

What are the ovaries, their tubes and functions?

The Ovaries are "Flattened ovoid," or almond-shaped bodies, the germ-glands of the female—lying in the plane of the brim of the pelvis, on either side of the uterus, attached to the folds of what is known as the broad ligaments, and internally are attached to the womb by their ligaments, and externally to the walls of the pelvis.

Their functions are to develop the female part, the ovum or egg that is destined to form the human being.

The ovarian tubes are the oviducts, one extending from each side of the upper angle of the uterus, between layers of the broad ligaments, attached with their frills to the walls of the pelvis, and extending to the ovaries at the outer ends, their functions are to convey the male generative cell to the ovum or female generative cell (egg), and these then pass through them to the womb.

What are the vulvo-vaginal glands and their functions?

These are two small oval bodies, one on either side external to the vagina, and behind the minor-labia, of the vulva, have a duct which opens in front of the hymen and behind the minor-labia of the vulva; their function is to secrete a viscid mucus, which lubricates the parts during coition.

What is the hymen and its functions?

The hymen is a fold of mucus membrane which surrounds the opening of the vagina, its functions are not pronounced, it may serve as obstruction to infection to the vagina, and is supposed to serve as a criterion of showing chastity.

What is the vulva and its function?

The vulva or pudendum, is the external genital organ of the female, consisting of a major and minor labia on each side, external to the vagina, their function being that of closing the orifice to the vagina, and assisting in copulation.

CHAPTER VI.

Sterility—Barren—Incapable of Producing Offspring.

IN a broad sense a woman is sterile who cannot become pregnant, or if pregnant cannot produce a child capable of living.

Sterility in men.

A man is sterile who cannot produce semen that will fertilize an ovum.

Sterility may be congenital—dating from birth, or acquired.

In the male, congenital or primary sterility may be due to deformation of the genital glands or other parts of the genital organs—incomplete development, etc.

Acquired—by child diseases—mumps, scarlatina, measles, peritonitis, or other inflammatory diseases, injury, etc.

Then acquired impotency—such as by self-abuse in youth. These are conditions that are frequent and ready victims of the quack doctors—by whom they are doped from year to year, to the depletion of their purse, but without help.

The other group of acquired sterility by the male, comprises those who have been affected with gonorrhea, to the extent that incapacitates the production of life and fertile semen. These affections render the male incapable of supplying living semen, though capable of an apparently normal sexual coitus.

Sterility in women.

Sterility of the woman, may be either congenital or acquired, and may involve any organ of generation or portion of the genital tract from the vulva to the extremities of the fallopian tubes.

Besides the local causes of sterility, the general condition of the woman is at times responsible for the inability to conceive, and it is not uncommon for women who are

suffering from constitutional affection to remain barren for an indefinite period.

Congenital, or primary sterility in women may be due to certain parts of the genital organs being absent, in others their development is defective, or deformed, so that they are not able to functionate.

Acquired sterility.

Acquired sterility in women, may be due to tumors, inflammtaions and adhesions of the fallopian tubes, or other local conditions that render it impossible on account of pain and obstructing the tubes or canal.

Infectious diseases in marriage.

Infectious diseases, especially gonorrhea, which is one of the most frequent causes of sterility in young married women who become infected by their husbands. They may have one or two children, but are then barren, due to the damage done by that disease.

The next, and equally if not more numerous causes of sterility among young married women, is due to wilful abortion, and to prevention of conception. Women use means of prevention for years, but finally they take a notion to long for *a child or two;* but they cannot, they have become sterile.

Then we should not leave out of sight the fact that disease in childhood cause many women to be sterile. Among these are: enteric fever, scarlatina, mumps, peritonitis and other inflammatory fevers that may affect the reproductive organs; also premature change of life may be a cause.

Many cases of sterility are amenable to treatment, and yield to medical aid; manipulation and correction of existing disorders.

Painful copulation may be a cause.

Painful copulation may also be a cause of sterility, and this can be corrected or removed. Dilatation of the parts; correction of structure, by massage and stretching the parts; by digital or instrumental manipulation.

Imperfect development and adhesions about the tubes, womb or other parts in the pelvis.

Acid secretion of Leucorrhea cause of sterility.

This may be removed by a douche of normal salt solution, two teaspoonfuls of salt to a quart of warm water per Vaginam a few minutes before intercourse if due to that type of sterility; or a few local treatments of the servix by a physician will correct the secretions.

Soon as any disorders and discomforts are noticed, assistance should be sought from a competent physician.

Irritability may cause estrangments.

Irritability and *estrangements* do arise through fear of pain and may be caused by inactivities of the sexual organs—and often are not due to anatomical deformities; but to wrong ideas of modesty and absence of physical instinct, or knowledge of the requirements in coitus—so much so that copulation becomes repellent, to the extent of dislike, disagréement, separation and estrangement of one or the other of the married couple. This can be corrected—see Sexual Congress.

Infection of the new wife.

There is one grievance, a malady, that outstrips all others: the infection of the new wife by the husband with gonorrhea, causing a vaginal inflammation, and not knowing the existence or cause of it, the poor woman suffers, often not even mentioning the fact to the husband, and so living a life of misery months or even years, childless, cheerless and miserable.

These are deplorable cases, but what should be done —should the wife get a divorce?

Not at all! That would not remedy matters, but make things worse for her.

Such should seek assistance as soon as it appears, there is something not just as it should be. It is too late to complain; there was no intention to infect the

wife—and the best must be made of the situation—both must be treated until well—best by the same physician.

"Forgive and forget"—can be the only rational conclusion.

"All is well that ends well."

CHAPTER VII.

The Principal Object of Marriage.

As recognized by Christians.

THE discussion of this subject may be conducted in various ways and from several viewpoints.

Marriage, as recognized by Christian Nations is naturally seen from the Christian viewpoint, and it is from this standing that the author will conduct this chapter. Adding the evidence by the natural law of science together with the experience of medical practice.

Marriage is a mutual agreement by which one man and one woman give themselves to each other until the separation by death, and this chiefly for the sake of the higher interest of the children which shall be born to them, and for their own well-being.

Incontinence would prevail.

Unless there be a remedy for concupiscence, incontinence would largely prevail, and with it, all evils of jealousy, quarrels, illegitimacy, separation and divorce.

Conjugal restraint.

All who look forward to marriage do so with a view, as to a state of ideal happiness. Yet, how many fail to realize their ideal. It makes you jump in astonishment, to think of what you expected, and compare it with what you have got.

Violation reaps punishment.

It would be strange if in all other animal tendencies of the natural law, we should council moderation, but in this allow ourselves unlimited indulgence. We should not forget, there can be debauchery in the pleasures of married life just as in the pleasures of eating and drinking.

Such excesses are a violation of the law of nature—which surely bring on nature's punishments.

In this, as in all other functions of man, happiness, virtue, and well-being are to be found in moderation, and moderation is secured by rational restraint. The question before us then is, what is to help to attain a higher happiness?

Natural law allows a wide freedom in the enjoyment of conjugal pleasure, but still not beyond reason.

It should never be forgotten that one of the ends for which marriage was instituted was that it should be a remedy for concupiscence. Therefore, in order that there shall be no danger of indulgence outside of lawful matrimony, the widest possible exercise should be and is permitted within matrimony.

However, rational restraint is the way to the higher and fuller happiness in married life. The reasonableness of this counsel is brought under control of the will. Thus, restrained and controlled, sexual appetite can be directed to the three great ends for which it was made, and so can be prevented from abuse, for which it was not made.

There are three great ends for which marriage was instituted, and consequently three reasons which make the marriage act lawful and sacred.

The first and chief is the begetting of children.

The second is the calming of concupiscence, and consequently avoiding of incontinence.

Conjugal love and affection—their happiness in their offspring.

The third is the fostering of conjugal love and affection. All these tend to the perfection of both, the individual and of the race. The married couple see in their offspring the continuance of their own life. Their joy is to know that a child is born to them, to see the child grow up and become settled in life, to hear that their own son is making his mark in the world; that their daughter is married well and happily. Therefore, it is natural that where there are no children the married are not so happy as those who are blessed with their own offspring.

Is needed to prevent incontinence and divorce.

The second and third reasons are to minister to the first—unless there were a remedy for concubinage, incontinence would follow, and with it all the evils of jealousy, quarrels, illegitimacy, separation and divorce. Furthermore; the fostering of conjugal love tends to the increase of offspring, and to its good bringing up.

Sensual pleasure.

Sensual pleasure for its own sake is not among the recognized reasons for the exercise of the marriage act.

It passes away with its own satisfaction, and if indulged in only for that purpose has neither use nor dignity.

As a matter of fact, it was made to minister to higher ends.

It is only an adjunct to marriage, intended to make it attractive for the benefit of the race.

May destroy love.

If, therefore, it is perverted and made an end in itself, and if its higher ends are not observed, then it defeats the aim of matrimony, destroys the love between husband and wife, it shirks the burden of children.

In order that the sensual pleasure may be the servant and not the master of man, it should be restrained; but not crushed or destroyed; it should be moderated so that it may remain as long as possible a help toward conjugal love—towards the normal satisfaction of the sexual appetite, and towards the possession of a large family of healthy children. To let sensual pleasure have its full fling is to lessen its keenness, destroy its power and render it disgusting. There can be no general rule for everybody. What is moderation for one couple, may be excess for another, what is moderation for one partner may be excess for the other. Each case must be judged according to its own circumstances.

In deciding this, the existence and welfare of the offspring should be the first consideration.

Incontinence tells against the interest of the offspring. Each partner then, has the duty of seeing that, as far as possible the other shall not be exposed to this danger.

For the sake of the home.

For the sake of the home and family, therefore, each one is bound to render the debt as often as reasonably asked.

Therefore, for such a sacred purpose either partner should be willing to undergo some inconvenience.

Truly, marriage is supposed to be fraught with serious inconveniences. The care of the child-bearing is no excuse for the wife refusing consent, neither is the expense of the child's rearing and education an excuse for the husband refusing consent. Not even a difficult child-birth is sufficient reason for refusing.

Counsel rather than precept — doctrine of St. Paul.

The intention of this chapter, however, is to indicate counsel rather than precept; to point the way of higher happiness rather than the lowest degree of strict justice.

The doctrine of St. Paul is our inspired authority. In laying down this doctrine he was careful to say that it is a mere recommendation and not a binding obligation.

"Defraud not one another, except perhaps, by consent, for a time, that you may give yourselves to prayer," (Cor. VII-5) and return together again, lest Satan tempt you for your incontinency.

In the first place St. Paul defends the conjugal rights of each other.

Conjugal restraint.

The husband is not to take upon himself any extraordinary restraint without the consent of the wife, or the wife without the consent of the husband.

The aim of conjugal restraint is to acquire a wider and deeper spirit of life, and preservation of health and vigor. But, to do so at the expense of another's rights,

may be an act of injustice which of its very nature militates against the better life.

Institution of marriage.

God instituted marriage as a remedy for concupiscence; and to deny this right to the other partner entails a danger of incontinence. Such an act of injustice entails spiritual loss to all concerned, and may cause a source for discontent and unhappiness in the family.

Lawful restraint in the marital rights.

Lawful restraint requires three conditions: First, it must be by mutual consent. Second, it must be only for a limited time. Third, it must be for the sake of a higher spirit of life.

"All things have their reason; a time to embrace and a time to refrain." And the time most fitted for this abstinence is the time of solemn fast or feast.

Solemn fast or feast.

"Blow the trumpet in Zion, sanctify a fast, call a solemn assembly; let the bridegroom go forth from his bed, and the bride out of her bridal chamber."

The two observances are mutually helpful; the abstention promotes religion, and religion promotes restraint.

Counsels of St. Paul.

The counsels of St. Paul and the church are supported by the counsels of nature. Much liberty is allowed by nature, but she will rebel if she is over-taxed.

Excesses are rebeled by Nature.

It is astonishing how the race continues, considering the extent to which its reproductive powers are abused. But nature gives ample warning as the limits of moderation are transgressed. If the excess be persistent and grave, she visits the offender with grave chastisement. She is kind but strict. The married pair, then, have the advantage of two guides—nature and religion.

Nature gives the first warning against excess. The moderate exercise of sexual life ought not to interfere with the working life of either the husband or wife.

The strength of the weaker partner, then, will be the measure by which restraint is to be judged.

It would then be strange if in all the other animal tendencies nature counseled moderation, and in this allowed unlimited indulgence.

Debauchery in married life.

It is therefore not unnatural that there can be debauchery in the pleasures of married life, just as in the pleasures of eating and drinking. Such excess is a violation of the law of nature and inevitably brings on nature's punishment.

In this as in all functions of man—virtue, happiness and well-being are to be found in moderation, and moderation is secured by rational restraint.

The question before us is not so much as to what is sin or not sin, but rather as to what helps to higher and true happiness.

The three great ends.

To sum up this counsel is in the fact, that by reasonable restraint, the sexual appetite is brought under control by the will. The will guided by reason, and reason in turn is illumined by Divine Wisdom. Thus, restraint and controlled the sexual appetite can be directed to the three great ends for which it was created, and so be prevented from abuse, for which it was not created.

It is, sometimes difficult to draw the line, and wherever the line is drawn it means dissatisfaction for one or the other of the parties concerned.

How much better then, it will be, if both have practiced restraint when it was not obligatory.

It produces a habit in mind and heart, by which the stronger partner will show tender regard for the weaker.

There may arise the necessity of temporary absence from home on account of business or otherwise, and having practiced restraint when not obliged to do so strengthens the mind to overcome temptation.

CHAPTER VII½. SS.

The Husband's Duty.

THE man assumes a very grave responsibility in his marriage.

Doting parents have confided to his care the wellfare of a beloved daughter and a trusting woman has risked her future happiness in his keeping. It will largely depend upon him whether her pathway shall be strewn with roses or thorns.

Let your wife understand fully your business. In nearly every case she will be found a most valuable adviser when she understands all your circumstances.

Do not be dictatorial in family circles. The home is the wife's province. It is her natural field of labor.

Having confided to the wife all your business affairs, determine with her what your income will be. Afterwards ascertain what your household expenses will necessarily be, and then set aside a weekly sum which should be paid the wife at stated periods.

Let this sum be even more than enough to pay all bills. You may be sure the wife will seldom use the money unwisely, if the husband gives her his entire confidence.

Your wife, possibly, is inexperienced; perhaps she is of delicate health also, and matters that would be of little concern to you may weigh heavily upon her. She therefore needs your tenderest approval, your sympathy and gentle advice. When her efforts are crowned with success, be sure that you give her praise.

Few husbands realize how happy the wife is made by the knowledge that her efforts are appreciated.

If a dispute arises, dismiss the subject with a kind word and do not seek to carry your point by discussion. It is a glorious achievement to master one's temper.

You may discover that you are in error, and in her cooler moments, acknowledge the fault.

Endeavor to so regulate your household affairs that all the faculties of the mind shall have due cultivation. There should be a time for labor and a time for recreation.

There should be cultivation of the social nature, and there should be attention given to the spiritual.

The Wife's Duty.

MAKE your home home-like; keep things tidy at home. A husband likes to come home and find his abode looking neat. And he also enjoys sitting down to a real meal. A wife should display her best conduct, her accomplishments, her smiles, and her best nature at home.

She should be careful in her purchases, and let her husband know what she buys, and that she expends her money wisely.

Let no wife devote a large portion of her time to society-work, without the full concurrence of her husband.

Beware of entrusting the confidence of your household to outside parties. The moment you discuss the faults of your husband with another, that moment an element of discord has been admitted which may one day rend your family circle.

Be discrete, do not be over ambitious to make an expensive display in your rooms. With your own work you can embellish at a cheap price, and yet very handsomely, if you have taste.

Let adornings of your private rooms be largely the work of your own hands.

Beware of bickering about little things. Your husband returns from his labors with his mind absorbed in

business. In his dealings with his employes, he is in the habit of giving commands and of being obeyed. In his absent-mindedness, he does not realize, possibly, the change from his business to his home. Should such be the case, avoid all disputes.

Whatever may have been the cares of the day, greet your husband with a smile when he returns.

Let the home be so attractive that all recollections of it, when away from the same, shall attract him back.

Improve your mind, keep in touch with what your husband is doing in a business way, show an interest in his business, and in every way be a real helpmate.

Striking suggestions

Men as a rule, are ready to defend their homes with their life; and therefore, it is so much more the duty of women to make the home as agreeable and pleasant as possible.

Women can achieve more with cookery, than with the ballot. The sphere and activity of the woman is in the house rather than in public life. With all her domesticity, a house-wife can acquire an extensive knowledge of public affairs, and in an indirect way exercise her influence on the public. But, where domesticity of the wife is lacking, there vanishes the husband's love for the home, and with that, the love for the wife.

Every girl, whether she intends to marry or not, should acquire the knowledge of a good cook, and a good housekeeper.

Girls should from early youth be educated in cooking and preparing of healthy and wholesome food. Good cooking dispels nervousness, brings happiness and reduces unhappy married life.

CHAPTER VIII.

What About the Poor?

THIS question should not escape proper consideration. There are many who have not a living wage, yes, thousands have no wage at all.

Many good earnest-minded men advise such, that it is a crime for a man earning small wages to marry and bring children into the world, whose only heritage will be that of poverty and want.

Too well do we know with what anxiety the arrival of each little newcomer is looked forward to, as it means more to feed and clothe, while the earning power of the bread-winner is gradually growing less. But conscience tells that we are obeying the Law of God; and we may well ask, "Is it ever to be thus?" Must we, in order to do what we were created for, commit a crime against our own offspring? And in this dilemma inquire, "Which is the greater criminal, the workingman for obeying God's Law, or he who causes such a condition that prevents him from rearing his family in decency and comfort?"

Although one looks on little children as precious heirlooms sent from God, and with full knowledge that they beget happiness, could one be blamed should he advise his sons not to marry until late in life, or refrain from marriage altogether; and so restrict the birth-rate, the decline of which is causing so much agitation throughout the country?

Let it be said, here, that poverty should be no bar to marriage.

The poor are entitled to all the advantages and joys which pertain to the married state, and the possession of children.

POVERTY and destitution in its extremity, is a deplorable evil; but, is a mere trifle compared with the evils

of incontinency which would follow if the poor were forbidden to marry.

Normal marriage and reproduction by the poor is a mere trifle compared with those detestable evils against nature, the artificial restrictions of births.

Certainly, there is no reason why young people should not abstain from the marriage act until such time when they are able to provide the means with which to sustain a decent family-life; provided this can be done without danger of incontinency. This course, indeed may be profitably recommended; but temptation will be strong amongst those who try it.

Marriage a religious question.

After all, the sexual question, although largely a physical one is a religious question. The marriage-bond is something quite distinct from lust. Lust seeks its own animal gratification, regardless of any other end.

Love on the other hand, seeks the higher well-being. The love of the married pair then will be above all things —considerate and tender toward each other. Whatever sensual pleasure there may be, it is incidental to this love, all with the main object of a higher well-being of the husband, wife, and children.

"Ah, what would the world be to us
If the children were no more?
We should dread the desert behind us,
Worse than the dark before.
What the leaves are to the forest
With light and air for food
E'er their sweet and tender juices
Would be hardened into wood?
That unto us are the children
Through them we feel the glow
Of a brighter and sunnier climate
Than reaches the trunks below."

CHAPTER IX.

Sexual Congress.

Need of instruction.

WHY men and women should need instruction on every phase of the human family except this, certainly is an incongruity.

This subject should not only be studied, but, studied with all sincerity, as a sacred duty, and as a natural adjunct to married life.

Sexual congress being one of the most important parts of married life should therefore receive most careful and sincere consideration from every phase and in detail. Therefore, the object of this chapter then, is to give a concise and plain instruction on this subject, to enable the married to obtain the best advantage, how to preserve their married state.

Since marriage obligates the married to sexual congress, it is but natural that those who contemplate that state, or are married, should obtain the needed knowledge of what that duty consists, when it is right, when wrong, and how to conduct it rightly. Health, happiness, and welfare of the couple and their offspring, may depend upon the proper understanding of this function.

Estrangements due to ignorance.

Many estrangements, separations, and divorces would be avoided if this function of the married were properly understood.

It is common belief with many that this is instinctive, and needs no instruction; such a view is erroneous, it is unreasonable.

Ignorance along these lines causes much trouble and misery; say nothing of the pleasure that is not attainable because of errors.

Knowledge a requirement.

Man is endowed with power to acquire knowledge, little he knows except what he learns, and man is expected to learn the proper use of his functions to the best of his ability. And this should especially pertain to the family life and duty.

Sexual intercourse being one of the most important functions of married life, naturally should require reasonable instruction.

Many—indeed most of those who essay the sexual function the first time are totally ignorant along these lines, and so far as the man is concerned, he regards the seminal emission and the consequent relief of the congestion of his organs as all that is required of the act. This is brutish in manner of regarding this function, and is simply animal, having no regard whatever for the esthetic aspect of coition.

Brutish manner.

Although this view may cause a smile of skepticism, perhaps of derision, in many persons, there is none the less an esthetic side of the sexual act, entirely apart from the animal, and this can be fully realized only by those who consider this subject from the natural and reasonable viewpoint.

Procreation not the only object.

Many excellent people regard the congress of sexes as intended for nothing more than procreation.

In other words, that sexual intercourse should be indulged in only for the raising of a family, and that the begetting of children is the Alpha and Omega of the function.

Procreation is the main, but not the only object.

These instincts, powers, and organs, are possessed by man and woman, not simply to breed children as animals breed. But they were given also for other purposes—of enjoyment as well as cementing affection; and this side of the question properly understood, regarded, and in-

cluded with the other, goes a long way to ensure harmonious marital relations.

Therefore, it is plain that at least a rudimentary instruction should be had by all who enter married life.

Every aspirant for marriage should acquire proper knowledge of marital requirements and duties as husband and wife.

Much misery, misunderstanding and unhappiness would be avoided if the married state and its duties were better understood from the beginning.

We can here only give an outline of this subject in a general way; but, hope that it will be sufficient to enlighten the willing; if further and minute information is needed they should, without hesitation, consult their physician.

Many couples live unhappy, and some remain childless because they are too timid to seek advice; others do not seek medical advice because they think nothing can be done to help their cause.

The greater part of these troubles are due to impediments easily removed.

Impediments greatest trouble.

The married should be plain and frank with each other in matters concerning their marital relations.

People are willing to talk of all things concerning the sexual relation of stock; how to breed healthy animals, etc. But when it comes to themselves—the most important of all—then there should be no mention of such things, even between husband and wife:—Is that reasonable?

The purity of man and woman does not become impaired by mutual intercourse, neither by their mutual consultation and instruction on this subject. It is not a privilege, but a duty of one to the other that this matter is rightly understood by them; and that they understand each other plainly in these things; and that can be had only by mutual discussion and sound consideration.

To promote marital fidelity.

This rightly understood will promote marital purity and fidelity.

If they are free and confidential with each other in their discussion of these matters, that will conduce to confidence, and pleasure in each other's company, that will be wanting otherwise.

There should be no fear of impropriety between married couples to speak to each other concerning these things in proper manner.

The subject should be regarded as natural, sacred, and important duties, then there is no misunderstanding nor fear of one another.

The wife should be a person of neatness and modesty in the presence of her husband as well as in company. That does not interfere with her wifely duties, and proper counseling with her husband about all things; marital relationship included.

The frigid should not marry.

Are some people incapable of exciting or have sexual desire?

Yes; but such are very rare among those in normal health; there is hardly such a thing as incapability—apparently so only—those who know themselves to be frigid should not marry.

Ordinarily wise and proper caressing will enliven the desire in the other partner, and that should always be awaited for.

When indulging in this function the body should be in health, the mind undisturbed, and the act occur spontaneously—there should be gentleness and ease in the exercise.

The wife, more often than the husband is lacking in amorous excitement, the husband then should endeavor by acts of endearment and caressing, induce excitement and anticipation, so that the act may be agreeable to her —certainly that it shall not be repugnant.

Forbearance always.

Be gentle and forbearing always; but particularly at first—then there will be no fear nor much pain.

There need be no set rule for position nor for movements—the most convenient, and courteous, is on their sides facing each other.

The act should be gentle, with ease and prolongation, as far as possible, in order to derive the fullest satisfaction from the function; and after the emission, the husband should be in no hurry to separate, but remain, the wife then taking the active part, for, in her the orgasm often takes place after that of the husband.

The husband, therefore, should prolong the act as long as possible in order that she, whose orgasm and sexual excitement is much slower than that of the husband may have time, and the act be completed by both. The intervals being occupied in caressing the wife in lavish terms and endearments, making her feel that she is something more than a passive human instrument of masturbation.

She will reciprocate the kindness, it will touch and please her, so that at last the pleasure is mutual.

Prolongation proper.

This may be prolonged with advantage to both, and the caressing which terminates the function causes the wife to feel that sexual gratification is not all that induces the husband to seek her embrace, and that affection, not passion alone, has been an important factor in the union, and, thus instead of dreading or disliking her husband's approach, she welcomes it with readiness, and is equally willing to respond to his affectionate advances.

However, it should be the wife—not the husband that offers coitus—the wife being more observant; this is usually brought on spontaneously if proper caressing is had.

From the foregoing observations it should be plain that married people should study these questions well. They will not only realize the most benefit that conjugal

congress offers socially, but also preserve their health and general happiness. Many, especially women, are sufferers of conjugal errors—not always by the pain caused by undue violence—but more often because the wife has not been given the needed time to begin and end her part—she becomes physically, and often mentally ill.

Errors quite common.

What are the main errors that are injurious and wrong in conjugal intercourse, and why?

Two of the errors that some married people commit are: withdrawal of the male organ before emission, the other is withdrawal before the wife's orgasm has been completed; causing a shock to the nerve system. It is bad for both—the man and the woman, producing urethral and prostatic inflammation in the husband, and subacute forms of metritis (inflammation in the inner lining of the womb). In the husband loss of sexual and mental power—including prostatitis, and neurosis of the ovaries in the wife; due to incomplete coitus, and where emission does not take place at all, it is wrong precisely for the same reason, and with about the same harmful consequences.

Frequency of sexual congress.

The question of frequency of conjugal intercourse is not easily stated. Much depends upon the parties themselves; they should act manly and wifely—regard their health, and consider their condition—all things may be abused—this in particular.

More than one time in a night, is too frequent. Young people may for a time indulge nightly—later on two or three times a week or month, etc.

It has thus been said with truth:

"He uses his wife ill, who uses her as a *Harlot.*"

(Note—See article on, The Nervous Woman, Masturbation, Sexual Congress, etc.)

Restraint during pregnancy.

It is perhaps impracticable to prevent sexual intercourse during the entire period of pregnancy, but it should be practiced, if at all, with great moderation and restraint. It may result in the interruption of pregnancy if the patient is predisposed to abortion.

In the latter weeks it should be avoided altogether, since it may be the cause of infection, resulting in hemorrhage and premature birth.

It is said that God has bestowed upon man these functions to be used;
That undoubtedly is true.
But, we must not forget that He also has endowed man with reason;
And nature's time and season.

CHAPTER X.

Abortion and Prevention of Conception.

Destroying of the unborn.

UNDER this head we shall consider both criminal abortion and prevention of conception—there being a close relation between them—objective and physiologic—both aim to prevent or destroy life, and both are as a rule, injurious to the mother's health and well-being; both at least are serious offenses, a crime that many married people commit and do not realize the seriousness of the act.

Is wrong and is an unnatural act.

It is wrong, and altogether unnatural for married people to try to evade the responsibilities and natural outcome of married life, especially those of bringing forth and the rearing of children—the first intent, and the highest purpose of marriage.

Leaving out the normal aspect for the present—what are some of the consequences of prevention of pregnancy?

Prevention of conception.

Notice the sickly wives—those sufferings which are due to such errors—preventing and refusing to carry conception to term—not mentioning those who lose their lives from this same cause.

Another penalty is the sterility resulting.

Artificial abortion.

Again, comparing results of abortion due to natural causes; such as a pregnant woman meeting with an accident through which she loses her pregnancy (we refer to normal healthy women), these, in almost every case recover unharmed.

On the other hand girls or wives, as the case may be, who abort artifically, even with the greatest care, per-

formed by some miscreant of a physician or midwife, so many are injured for life—become sickly and miserable; the deaths too resulting are very numerous—seemingly, nature revolting.

Nature rebels.

Furthermore, physicians who give this thought will bear us out when we say—that a woman having an artificial abortion performed is not as sound as previously, and morally, she will never have a clear conscience.

The hand of God seems to be against that wickedness.

Large families of children.

Much is heard in our day—of large families being hard on the mother; that the physical quality of such children is reduced; that the mother who bears many children loses the vitality required to bear strong healthy children, etc. And that for the purpose of giving those which are reared a better chance in life, the family should be limited to two or three children.

Not only (they contend) would this improve the race morally and physically, but the mothers would retain their health and live longer.

Does experience and living example sustain those theories?

The happy mother of many children.

We need not answer this question; observant persons need only notice things in their own neighborhood.

Who are the healthy and happy women—grandmothers, those who are mothers of large families, or small?

You will find them most invariably to be those who have borne and reared large families.

Which among children, as a rule, are the healthiest, most robust, and best natured children—those of large or those of small families?

Almost invariably those of large families, and the successful men and women from large families, far outnumber those of only one or two in the family. Estab-

lishing the fact, that the number of children in a family being great, does not deteriorate, but rather the reverse.

It is the mother of the many children, the mother who was fortunate to rear them well, who possesses a free conscience.

The mother whose motto has always been—"Rather thirteen at the table, than one on my conscience," is the ideal mother and grand-mother.

"God, it seems blesses the mothers of large families even in this world."

At least, it appears that way to any one taking serious notice to these matters.

Let us present an example:

The family of thirteen children.

The author having been called into a family during the time of writing this book, and by the way, while deliberating on this very chapter, to wait on a married daughter of a family of thirteen children; the mother of the sick daughter at her bed-side. This is one of those happy hard-working grand-mothers, always in a good humor—ready to help any of her children, and they her.

Commenting on the beauties of large families and comparing them with the present time ideas, and the question of high cost of living, she spoke up in this manner: "Dr.! When I think of my family comparing it with our condition during those years, I wonder how we came through as we did. My husband earning in those days on an average not more than seven to nine dollars a week, children coming fast—so that you could stand them in a row, looking like steps. And, in addition, as they became old enough, we sent them to the parochial school. But, we got along, seldom had sickness—and never wanting for something to eat. Later on, of course, the older ones began to earn small wages; that helped to meet the increasing expenses."

This being a mother of thirteen children, needs no further comments.

But we shall present another, a mother of sixteen children two of which died in infancy, and fourteen, of which none died under seventy years of age.

Mother of sixteen children.

This mother was of well-to-do parents and became wealthy in her own family, and according to the statement of her grand-daughter to the author, was a happy, hard-working woman. All of her children were healthy, strong and no "Black Sheep," among them. This mother lived to be ninety-three (93) years old and in good health to within six months of her death.

Her daughters were all healthy and had large families. One of whom, the mother of the lady who gave the author this history had eight children, one died in infancy and seven are living and have families. None of that large family, none of which are defective or in ill health.

So much for large families, and proof that large families do not weaken the race.

Now, what do we find in small families?

At least nothing that indicates that a small family will improve the race, nor the moral quality. We have already given ample space to that part of this question.

We should, however, not forget that the claim of such who advocate small families in order that they may have better social advantages, that the parents are better able to provide and school them and so improve the economic and social welfare of their children, that they can leave them better materially, there are not so many among whom the inheritance is to be divided.

They will be better provided for in the material point of view—have a better standing in the world—small families will prevent poverty, etc.

These claims seem plausible—but, is that the rule? When we investigate fundamentally, do we find this to be so?

Or, have we not as large or larger percent of de-

fectives among the smaller families? Have we not more sickly and feeble-minded emanating from the small family—in proportion to those from large families?

Have we not more criminals in proportion from small than large families? And as to the heritors: That is not even for the good of small families either.

Is it not true that by reason of these differences members of small families are inclined to be careless and do not make as good use of hereditaments as do those of large families?

Hence to advocate small families to improve the race and its welfare is not based on good reasoning.

Furthermore; limiting the number of children being as it usually is, accomplished by interference with conception and gestation is a transgression against nature. To interfere with the course of gestation is each time a physical shock to the mother.

THE HARMFUL RESULTS NEED NO EXPERT TESTIMONY.

Notice the female troubles resulting and following these transgressions.

What pleasures are there in the company of such a sickly woman to her husband, family or friends?

It is equally wrong for the husband or the wife to interfere with, or prevent conception and gestation.

Bad results.

Abortions that are performed even by physicians who are skilled in antiseptics, and use care turn out woefully disastrous in so many cases—wrecked lives, and fatalities are vastly more numerous than the laity are willing to acknowledge.

While on the other hand (we repeat), when an abortion occurs by accident, or through mishaps for which no one is criminally responsible, of whatever kinds of accidents, there are comparatively very few ill effects, and rare fatalities. And when we take in consideration that most of these ill effects and deaths following them, are due to prior diseases and improper care, we have remark-

ably few ill effects to record from accidental abortions.

These are facts that are established through ample observations.

And again; we must not only estimate abortion from the normal, physical and religious point of view, but also from that of the law of the land.

Abortion from the legal viewpoint.

The different states have Statutory Laws which provide severe penalties to the perpetrators—in some countries it is a capital offense, in others—manslaughter.

Wilful abortion is criminal in the highest degree.

The pregnant woman who permits an abortion to be performed, as well as any one would in any way be accessory to the crime are held liable as in other cases of manslaughter.

The physician is not permitted to perform such abortions nor to prescribe medicine for that purpose.

Neither is the druggist permitted to sell such drugs for that purpose under severe penalties.

The physician who is found guilty of such work, forfeits his license to practice, and depending upon circumstances may be prosecuted for manslaughter.

Wilful abortion same as murder.

The abortion if performed artificially or wilful, is the same as murder, because it destroys the life of a human being.

If pregnancy is disturbed wilfully, and caused to be expelled before the woman feels life, or before the end of the second month of gestation, would that be the same as destroying a human being?

Yes; not only in the Law of God, but also in the sense of physical nature. An unborn child is a human being, it consists of the elements of a human being from the time of its very conception, though in the beginning is not yet developed.

If it is considered that the mother is not able to carry the child to term, may it not be sacrificed to more surely save the mother's life?

No. Even if it is considered that the child will die without interference, wilful and directly intended abortion is murder; for God alone gave the child its life, and He alone has the authority to say when it should die; and the criminal law in most states is agreed on this.

Therefore, wilful and directly intended abortion is never permitted; even if it were to save the mother's life.

We are never permitted to kill an innocent person in order to save the life of another.

Conception takes place the moment the male and female elements have met in cohesion, in other words, when they have intermingled with each other, both elements living within one another and found a lodging place, thereby creating a new being, and not until then conception has taken place.

To prevent conception knowingly, is certainly against the law of God. In Genesis, we read of Onan, who was guilty of such an act.

'And therefore the Lord slew him, because he did a detestable thing, (XXXVII, 10)."

Reason itself tells us that it must be unlawful, for, if it were generally practiced, that would destroy the race.

The wrong (the sin) consists in this that the act (prevention of conception) in itself aims at the destruction of the human race by purposely frustrating the purpose of matrimony.

Notice: Statistics show that an overwhelming majority of famous men and women in history came not from small families, but from large ones.

CHAPTER XI.

Miscarriage, its Cause and Prevention.

MISCARRIAGE or premature expulsion of the child or fruit of the womb, if it takes place before it can live by itself, is called abortion; but if it occurs at a time when the child is able to live independently of the mother, it is called premature birth or miscarriage.

Its cause and susceptibility.

Miscarriage may be caused by a fall, over-lifting, over-stretching, by a misstep in going up or down stairs, running or jumping, tight lacing, general debility, emaciation, grief, inflammation of the womb, vagina, etc., especially when due to infectious fever, injury by violence, tumor, etc.

A woman who has miscarried is apt to be susceptible to future miscarriages. This, however, may be due to the first cause; and when again pregnant should use extra precaution to counteract the tendency.

Especially should she be careful during the time of the previous miscarriage, and avoid sexual intercourse during the time that otherwise would be her menstrual period.

While a bloody discharge during early pregnancy may not indicate danger of miscarriage, it is prudent that she lie down soon as the discharge appears and send for a physician.

May be prevented.

Many abortions and miscarriages can be prevented if early attention is given to threatening symptoms.

May not under certain circumstances premature birth be brought on through which the life of the mother and child be saved?

Premature birth may be brought on when?

Yes; a mother who has no other means to save her life, may permit a premature birth of her child to be brought on at a period when it is old enough to live outside of the mother's womb; for although the child may die after its removal, the removal itself is not only done for the benefit of the mother, but in the majority of such cases it is the only chance of saving the life of the child.

That period is generally the sixth or seventh month after conception.

It is at this time a mother is apt to experience difficulties in this direction.

What precaution should pregnant women observe to guard against difficulties?

Should consult physician.

Every pregnant woman should as she finds that she is not getting along as well as she should, consult her physician; in fact, that should be done by every prospective mother, even if all seems well, she should consult her physician at stated periods of gestation so that she may receive needed instruction. Many abortions and premature births may so be prevented.

Furthermore, the prospective mother's mind is at rest—she feels confident that there is nothing unnatural and that she is not neglected.

Should pregnant mothers use remedies (such as mother's ease, etc.), intended for an easy delivery?

Medicine no value.

Such medicines are of no value—the thing to do is to follow the directions of the physician, keep the bowels regular, proper dress (no lacing), proper food, plenty of ripe fruit, proper exercise, observe things that are reasonable and conducive to general good health—best under direction of her physician—she may need no medicine at all.

Gossips not in place.

It is a notable fact that gossips are the busy-ones—especially in cases of first pregnancies—they have all sorts of

stories and helps to offer—some tell the young prospective mother of all sorts of horrors and dangers.

Keep away from them, hold to your physician who will see that you get all information you need, and that all is done to be delivered safely.

When mother's life is endangered.

Summary and excessory remarks.—In cases where the mother's life is endangered by an unborn child the following means and methods of proceedings may be observed.

1st.—If the child is known to be dead, it may of course be taken in any way; even in parcels.

2nd.—If the child is not certainly known to be dead, nor old enough to live outside of the mother's womb, then neither an operation nor any medicine is permitted with the intention of killing the child; but if in such cases there is no chance that the child be born, and there is no other remedy for the mother, the mother may be given medicine which is intended for her recovery, although it may cause abortion.

3rd.—If the child is old enough to live outside of the mother's womb, it may be taken out unhurt and alive by opening the womb (by caesarean section), of course by a surgeon.

The same rule applies to the so-called false (ectopic) pregnancy, which takes place outside of the maternal womb, if the growth (tumor), is known to contain a living fruit or child. But, if it cannot be determined whether it is a fruit or a tumor, further development should be awaited, unless, the delay would endanger the mother's life; in which case the tumor may be removed, however without destroying its unknown contents.

The fact, however, that there is a tumor or growth in the pelvis of the pregnant woman, or even on the womb, is not an indication that the tumor or pregnant womb must be removed. For, not only are many women able in such cases to carry the child to term, but in many instances the pregnancy terminates the growth of the

tumor, and resulting in the bringing forth a healthy child, and disappearance of the tumor, with improved health of the mother, thereafter, with no recurrence of the tumor.

This is the experience of many physicians, and confirmed by the author, who attended several such cases, now fully recovered, and more pregnancies following most of them with best results.

CHAPTER XII.

Hydrocephalus.

Excessive fluid in brain cavity.

IS a condition in which there is an excessive accumulation of fluid in the ventricles of the brain.

This disease is either congenital (existing in the child in the womb), or develops in the first months after birth. The cause is not well understood. In such cases, of excessive large head, due to fluid in the brain cavity, so that the child cannot be born. The fluid may be drawn from the child's head in order to reduce its size and make its birth possible; although such an operation often results in the death of the child, it is often the only means of saving its life.

Does not permit crushing.

This, however, does not permit crushing of the child's head (craniotomy), nor any similar operation which causes certain and intentional death.

CHAPTER XIII.

Parental Impressions.

UNDER this head we shall consider not only the physical, but also the moral and social impressions that may be formed.

Mothers have no influence.

Many physicians claim that the mother has no influence on the child during gestation, neither physically nor mentally. But, since there are those who claim that the mother has great influence on the formation or malformation of the child and its character, it would be unwise to disregard this contingency.

The prospective mother's avoidance of everything that might be injurious to the formation of the child's body and character should therefore, be regarded not only as advisable, but necessary.

She should foster contentment, kind and cheerful feelings, and a spirit of devotion and prayer for her offspring; not only during gestation but also after its birth. For the impressions made upon the child's mind during the first months and years of its life are not easily changed; a spoiled infant will be a spoiled child, youth, and adult.

Hence the phrase, "He is a chip of the old block."

It has inherited its temperament from its father and mother; not only while in the mother's womb, however, but rather in their arms and in the crib.

Thoughtful parents naturally desire for their children that which is of greatest and most lasting good.

Thoughtful parents.

Remembering then that the child will not be, "As he is born, but as he is reared," parents should agree with one another on the management of their infant and their

child; its welfare, as well as the pleasure parents will have mostly depends upon the impressions the child receives of, and from its parents, shortly after its birth and early childhood.

Every child is an individual being with a life and destiny of its own; being dependent for its formation upon the training it primarily receives from its parents.

The moral character.

As to its moral character, the same theory holds good; opinions again differ, and should be considered with due conservatism.

Conjugal intercourse being permissible as explained before, married people have sufficient privileges necessary for the continuity of the race, and to lawfully gratify their desires.

But, considering this from the fact that conjugal intercourse during gestation may have great influence on the moral disposition of the child, it follows that it should be had with due respect and sobriety, then parents need have no remorse on account of anomalies that may occur.

Conjugal congress should not occur while in great mental depression; nor in insanity; neither when in a state of full intoxication. While it is not known to what extent such conditions exercise on the offspring, enough evidence has been seemingly discovered to heed this warning.

Influence of the mother.

Therefore, since the mother's life may have great influence on the moral and physical character of her child during pregnancy, she should carefully avoid everything that may be injurious to the formation of the child's physical or moral character.

She should foster contentment, kind and cheerful feelings, with a spirit of devotion.

She should try as much as possible to be at ease under most all circumstances, avoiding undue anxiety for herself and her child during the period of gestation.

IMPORTANT INFORMATION.

Important for pregnant mother — exercise.

THE mother should remember that the child is liable to be injured by any undue exposure; too much work or exertion on her part.

Normal exercise and regular housework is not only permissible, but beneficial to both mother and child.

However, she should especially during the time when her menstrual period would be due, avoid heavy lifting, tiresome washing and riding over rough roads.

She should wear no tight clothes, discard the hip (waist) bands of skirts, and fasten them to a loose waist so that the clothes may all be carried from the shoulders; discard all garters so that free circulation will not be interfered with.

Allow the breasts and nipples to stand out, that the nipples may extend. If the breasts become large, suspend them by means of breast-suspensions, which may be made of bandages or arranged in the undershirt, but be sure not to depress the nipples.

Maternity corset.

A maternity corset which includes breast supports, may be had at the supply houses and some of the modern women's furnishing stores.

Intoxicants may be harmful.

She should bathe frequently, take moderate exercise—housework is ordinarily the best exercise—live on plain food, but eat meats sparingly; leave off all intoxicants, preserve a cheerful disposition and guard against all anxiety, sudden joy or sorrow.

Incidentally it may be said that mothers should observe their daughters at the time they begin to grow into womanhood—see to it that they do not dress their chest so that their nipples are depressed (flattened)—much may depend on that they are not permitted to extend, and so cause prevention of natural formation.

CHAPTER XIV.

Thoughts for the Expectant Mother.

FROM the wedding day the young matron should shape her life to the probable and desired contingency of conception and maternity. Otherwise she has no moral right to the title of wifehood.

This chapter, however, is written not only for the newly married, but for every wife and guardian of children, as the reader will observe.

Motherhood not remote.

Motherhood is not a remote contingency, but the common duty and crowning glory of womanhood.

Married people should realize that: "The less children and the more servants in the house the less health and happiness," other conditions being equal.

It is natural for women to bear children, and unnatural to evade this function. The recurrent congestion of the generative organs, month after month, year in and year out, without the rest of generation, promotes disease of these organs, and favors all the various growths which afflict so large a proportion of our women.

What are some of the signs of pregnancy?

Signs of pregnancy.

One of the first signs of pregnancy, is cessation of the menstrual flow, then in the "morning sickness"; although neither of these is always certain. There are cases in which the menstrual flow may be absent without impregnation, and it may continue during the term of gestation.

The "morning sickness" is not a reliable sign, because the nausea may be present at any time, and is absent in many cases. It is commonest, however, in mild form after rising, ending soon after the rejection of breakfast;

and is most usual from the second month to the fourth month.

To prevent "morning sickness."

Prevent morning sickness.

In some instances, a glass of hot (not lukewarm) water brought to the pregnant woman five to fifteen minutes before getting up acts like magic with some to prevent nausea and vomiting in early pregnancy.

Pregnant women often suffer for weeks and months unnecessarily from "illness" of some form or another, the cause of which is the belief, more or less prevalent, that the condition of pregnancy is responsible and that relief is, therefore, impossible.

This notion is cruelly and dangerously wrong. Pregnancy furnishes neither a bar, nor a cause for illness, nor to its rational treatment.

The main thing is to attain the best health possible, and when the mother is healthy the gestation and birth will usually be normal and easy.

"Mother's Friend"

Medicines that are offered for painless birth, such as "Mother's Friend," should be disregarded, there is no virtue in them.

What should we have in mind when engaging a nurse?

In selecting a nurse, a capable trained one is preferable; but any healthy woman with good common sense and willingness to do what is good for the patient will prove quite satisfactory, provided she isn't too experienced and self-sufficient to observe the physician's instructions.

What should especially be avoided and observed about the pregnant woman's clothing?

Proper dress for pregnant woman.

Constrictions of all natures, of the chest and abdomen should always be avoided; it is especially important that the pregnant woman be careful in this particular. If she has already learned how to dress healthfully, she will need to make few changes in the early months.

No weight of clothing should be allowed to rest upon the hips; everything must be suspended from the shoulders.

The skirt and waist can be fashioned in one garment, and so made that they can be let out to accommodate themselves to the growing need. The dainty and pretty maternity gowns are everything that can be desired, and be so diversified that they meet all of the wants, tastes, and changes.

Patterns for these can be bought at the pattern houses.

The union suits of underclothing, the union skirt and waist combined, and the gown, are all that should be worn throughout the period. If more warmth is needed, it should be given in under garments.

How should the breasts and nipples be cared for during pregnancy?

Care of the nipples.

The nipples should be allowed to stand out free from the beginning, so that they will not be pressed into the bosom. Later on a maternity corset or other support should be worn. All efforts to conceal her condition by wearing faulty clothing, not only interferes with her own comfort and welfare, but also with the child's. Other things being equal, the more comfortable and healthy the mother, the healthier the child, and easier will be the labor.

It is needless to add that there should be no constriction around the waist.

There, also, should be no constriction around the lower limbs, these are often the cause of swelling and varicose veins; hose-supporters should be worn, garters should never be worn by anyone.

Proper exercise.

Daily exercise is highly important; ordinary housework, if not too burdensome, is quite commendable. Walking in the open air,

carriage or automobile riding are excellent when the weather is pleasant.

Feet should be kept dry.

The feet should be kept warm, and dry; plenty of sleep, including a nap of one or two hours every afternoon should be taken.

Bathing should be freely indulged in, a warm soap and water bath every night is refreshing and beneficial. Beginning with the fourth month it is well to take sitz-baths as often as twice a week for the following three months. These should be taken in a sitting position with only the parts about the hips submerged, and after this to the close of the period, every night just before retiring. The water should be hot as can well be borne, and the bath continued for at least fifteen minutes, while a half-hour can do no harm if it be enjoyed. Warm water should be added to keep an even temperature, and the bath should be taken in a warm room.

With proper exercise and baths there will be no need for abdominal bandages, the muscles will be so strengthened that they will do their work better than art can; fat people of course, excepted.

Care of the mouth.

The mouth should have special attention during this period. It should be rinsed after each meal, and the teeth should be carefully brushed once or twice each day.

The teeth are prone to decay during pregnancy, probably not on account of pregnancy, but because of neglect, or often because the digestive tract is neglected; often by over-eating, or injurious eating.

Her diet.

Of what should her diet consist? In regard to this the woman's own taste may be consulted, guided, of course, by good sense. Her food should be plain, nourishing, and sufficient in quantity. Unusually rich or highly seasoned dishes should be avoided; and if very unnatural cravings exist or nausea is present, medical relief should be had.

A diet which consists largely of fruits and vegetables is highly recommended; especially in the last two or three months of pregnancy. Such a diet is preferable to one containing too much starch, as is the case when they use mostly wheat flour and potatoes.

A good rule is:

Among other things for breakfast—an orange or apple, and another apple or orange during the forenoon.

At dinner, a small quantity of meat or fish, with potatoes, green peas or any other vegetables, and apples fresh, baked or stewed, or any other fruit that may be desired.

During the afternoon, the juice of an orange or apple or grapes, with sugar, etc.

At the evening meal fried apples, rice or sago boiled in milk, for a change, peeled and cored apples boiled with rice or sago.

And again grapes, figs or oranges. Then two or three times a week, a teaspoonful of juice of two oranges, a lemon, and a quarter of a pound of sugar.

In the beginning this may be a laxative for the bowels, if so modify it some, later on they will become normal. The varieties of vegetables and fruits to select from are abundant and we name a few of those which are most desirable, as follows: Beans, peas, white cabbage, savoy, rhubarb, asparagus, artichokes, kale, endive, cauliflower, celery, turnips, lettuce, cucumbers, beets, etc.

Apples, pears, plums, cherries, berries, melons, olives, peaches, apricots, nectarines, pineapples, dates, prunes, raisins, figs, lemons, oranges, grapes, etc.

The frequent ailments of pregnant women are principally due to wrong diet, and neglect of the bowels; a glass of water in the evening before retiring acts like magic with some.

This diet need not be monotonous, the individual taste can easily be varied to suit.

Care of the bowels.

The bowels, should be kept regular by proper diet and habits, or when this is not sufficient, then mild laxatives or warm water may be resorted to.

Protracted diarrhoea should be guarded against, because of the danger of inducing premature labor.

Is a slight flow of blood a symptom that needs attention?

Flow during pregnancy.

A flow at any time throughout the term of pregnancy, even if slight, must be considered grave enough to call for the counsel of a physician, and that should not be delayed. While there are those who have more or less of the regular flow during the first three or four months, and a few who may have such during the full term of pregnancy, it is an indication that there is an unnatural condition present, and consultation should be sought so that proper attention may be given the case.

In the case of pain, simulating menstrual or labor pains, if at all aggravating, are present, the woman should lie down, keep quiet and at once have the physician sent for.

Care of urinary organs.

Irritability of the urinary organs should be reported to the physician, it is important in every case, the physician should examine the urine a number of times, especially after the fifth month of pregnancy.

A four-ounce flask filled with urine should be sent to his office occasionally (or as often as he may direct), for that purpose.

Marked swelling or puffiness of the limbs, or any portion of the body should also be reported.

Care of breasts during pregnancy.

Should the breasts and nipples receive special attention during pregnancy?

Yes; it is well that as soon as it is certain that the woman is pregnant the breasts and nipples be given at

least some extra care, more especially during the latter one-third of the period. There should be no pressure on the nipples from the clothing such as would push them back, that may prevent them standing out; if they are too small or too short, they should be carefully, but firmly pulled out frequently, mornings and evenings, with the thumb and fingers; this by the mother herself; slight massage with fingers once a day will help to improve them.

If the breasts should feel heavy, as is often the case with those who have large breasts, much comfort may be had from proper bandaging or from a suspensory—that may be included in a good fitting maternity corset.

But pressure upon the nipples must be avoided; the bandage or suspensory must be so arranged, as to allow the nipples to extend.

Importance of pleasant surroundings.

What may be of service in the nervousness and irritableness of the pregnant woman?

First of all, if the cause can be assertained remove that if possible.

The pregnant woman is often unduly "nervous" or irritable. In such cases, it is the duty of the husband and others who come in contact with her to make her surroundings as pleasant and comfortable as possible, but at the same time it is incumbent upon her to try to overcome, as nearly as possible, a tendency to peevishness and petulancy. Remembering that as stated in another part of this work, that may have something to do with the character of the offspring.

One thing is certain, it will have much influence upon the mother's own comfort and health. "A cheerful mother—the sunshine of the home." And her health being good almost assures a safe and easy delivery.

Should not worry

Pregnant women often worry unnecessarily, and by that means bring on nervousness and irritability of temper, etc. This can be

overcome by control of mind, and by change of subject—when she worries she should try to occupy her mind in other matters—such as housework, a walk in the fresh air, or anything that will divert her attention.

A frequent source of worry is idle talk of the voluntary granny who knows all about some dreadful cases of labor, and delights in telling all she knows and much more. Such talk should not be heeded, or allowed, being altogether out of place, as under modern obstetric methods it is so rare for any serious ill to befall the lying in woman, that such contingencies need practically never be taken into consideration.

Marking of children.

Should the mother have any apprehension that her child may be marked?

This is with some a source of worry—the fear of "marking" the child. So-called marking of children does occasionally happen, but not because of any shock or fright or emotion experienced by the mother.

Young animals and plants are "marked" even more frequently than children; but the cause of these are due to improper development, the cause of which is unknown.

There is no connection whatever between the nervous system of the mother and that of her unborn child, and the mother can, therefore, transmit no nervous shock to the child, nor has she any influence or control over the product of conception at any time beyond affording it a safe abiding place and proper nourishment by way of the placenta or "after birth." It is as impossible for her to "mark" her child as it is for a setting hen to "mark" her chicks. If it were not so there would be no "unmarked children" born.

Impossible to mark children.

How then would we account for the anomalies and freaks?

Nothing can be more irrational than an attempt to explain the anomalies of organization which occur in man, to mental emotions, when corresponding malformations

occur among the lower animals, viviparous and oviparous; and also in plant-developments which apparantly result from defective or excessive formative powers.

Such explanation would certainly fail to account for the deep-seated organs, the existence of which are unknown to the pregnant woman, as in the congenital malformations of the heart, kidneys, intestinal canal, the abnormal distributions of blood vessel, etc.

Entertainment and Reading Matter.

THE prospective mother should not only be surrounded with pleasant and cheerful association in her home and avoid everything that might be irritating to her mind, but also the reading matter in which she may indulge should be such as will give her pleasure, preferably embracing stories of model parents, children and relations.

Her thoughts should be directed towards things that tend to dignity and uplift of the human race. The making of great men and women; how to train children to become good religious citizens, etc.

While as stated before, the mind of the mother may not affect the mind of the offspring, yet we can easily understand that agreeable surroundings and pleasant environments do tend to health and comfort of the prospective mother.

And that, of course, to every element of her physical quality.

Furthermore, it is known that the development and physical quality of the child depend upon the physical quality of the mother. It is also known that anything which tends to improve the mother's health and mind will at least tend to the ability of the mother to nourish the faculties of the yet unborn child as it develops in the womb of its mother.

These ideas were followed even by the ancients. They

were careful that their wives during the period of pregnancy were well cared for; that they were entertained and instructed to avoid unpleasant surroundings, that their offspring might be influenced in the way of pleasantness and perfection.

We should remember that the child will not be as he is born but rather as he is trained. Which again should remind us that the mother who is the especial one to train the child can be of especial service to the nature and character of the development of the child after birth, this by her amiable and exemplary demeanor in its presence at all times.

The child's character is not moulded in the womb of the mother, but rather in the sight of the mother. Its character is formed by imitation—especially in infancy and early childhood. (It smiles because it sees the mother smile, or vice versa.)

It learns by imitating its elders. Its ways and motions of its face, hands and feet, take after those of its elders by imitation.

This imitation is also observed in its behavior, its motions of the hands, head, body, mind and speech.

"What baby sees baby does." And, these characteristics so attained, remain in the characteristics of the child for life—as the child develops so develops these (not inherited, but inbred) habits, as a part of themselves.

Therefore, not so much does the health and character of the prospective mother affect the character of her offspring, as it affects the physical capability of the offspring to imitate and carry out the image and character of things it observes and experiences during its early life.

A puny and ill developed child, which is without physical energy, will not be able to expend physical energy, it has no interests in its world, and of course, learns little or nothing of its surroundings—will develop few or none of its faculties.

The human being unquestionably is endowed with certain tendencies and natural qualities which emanate from its parents. But it will seldom develop them otherwise than by imitation and through education.

The foundation for which is laid by its parents during infancy and early childhood.

Additional Symptoms of pregnancy.

Among other symptoms of pregnancy we may have shooting, throbing and lancinating pains in, and enlargement of, the breasts, with tenderness of the nipples, about the second month.

In some instances, after the first few months, a small quantity of water fluid or a little milk, may be squeezed out of the nipples.

This latter symptom, in a first pregnancy is valuable, and can generally be relied on as a certain sign of pregnancy.

Another symptom of pergnancy is a brown Areola or mark around the nipples. This, woman with large families, seldom lose.

Quickening is one of the most important signs of pregnancy, and one of the most valuable. As a rule, the motion of the child is felt at the same time. At this time there is a sudden increase in the size of the abdomen.

After this time there is less likelihood of miscarriage than before.

At this time some women feel faint or absolutely faint. She may be giddy, sick or nervous or even hysterical; but some do not even know the precise time when they quicken.

Some manifest a cheerfulness foreign to her usual disposition.

Some women feel better both mentally and physically during pregnancy than at any other time.

Separate beds. Many writers recommend separate beds for husband and wife.

While we would not recommend such separation, there is, no doubt, that both will be more comfortable during the wife's pregnancy, especially during the latter two or three months. Where they are reasonably temperate, no such separate sleeping places should be necessary.

Sleeping together, however, is natural and cultivates true affection, and it is physiologically true that in cold weather life is prolonged.

Weak feet in pregnancy. The preventive treatment for weak feet in pregnancy involves the use of proper footwear, with room for expansion at the top—rounded heel edges and nonslip soles to avoid accidents by catching in carpets, etc. It also includes daily exercise without tiring the patient, using tiptoe exercises and walking.

Neuralgic pains in the legs, back and sciatic region, and swollen ankles arouse suspicion of weak feet in pregnant cases.

To parents after all
  Children are their pleasure.
There's nothing in this world,
  That equals them as a treasure.
Will this to them remain—
  When grown and become old—
That depends in the main,
  Upon the parents as a mould.

CHAPTER XV.

The Lying-in Room.

WHEN the end of pregnancy approaches, arrangements should be made for the labor.

The lying-in room should be so comfortable as the surroundings will permit.

Avoid contagions.

No room should be selected which has recently been occupied by a patient suffering from any contagious or infectious disease, or from a suppurating or ulcerating sore. Nor should any bedding or furniture used by such a patient be admitted to the room.

There should be no difficulty to properly heat and ventilate the room, and at least ten days before the labor is expected to occur, the room and its contents, should be thoroughly cleansed and aired.

There should be no more furniture and furnishings than necessary.

The bed should be comfortable, but not too soft. If wire springs are used, some arrangement is necessary whereby excessive bagging of the mattress during the labor can be prevented.

This is best done by providing three or four bed slats or boards which can be placed cross-wise of the bed—under the springs to prevent sagging of the mattress.

Feather beds are always objectionable.

Articles for the lying-in-room.

The following articles, should be in the lying-in room: A piece of rubber sheeting or new oil-cloth about four feet square, for the purpose of protecting the mattress—a number of thicknesses of strong paper may be used as a temporary substitute.

A clean previously boiled blanket should be placed

over the oil-cloth, and a clean sheet over that. Three or four pads, made of old quilts or comforters, or blankets, should be on hand.

These should be thoroughly boiled washed and dried, folded and wrapped in clean sheets, to be taken out when needed. Pads made of cotton batting, tacked in cheese-cloth are preferred.

One-half dozen sheets—preferably old, soft and clean.

Two or three dozen sanitary pads made of a salicylated cotton and sterilized gauze. They should be ten inches long by three inches wide, and one and one-half to two inches thick; they must be made with great care in regard to cleanliness. The safest is to buy them ready made in unbroken packages. And these should not be disturbed until needed for fear of getting them contaminated. These may well be substituted with surgical cotton—best bought in ¼ to ½ pound sealed packages—kept sealed until needed for use.

In place of any of these, plenty of clean white cloths (rags) will answer; such should be thoroughly washed, boiled, ironed, folded, and pinned into an equally clean sheet or cloth, so that no dust or other infectious material will come in contact with them.

Plenty of clean cloths or old sheets may be useful at that time, and should be on hand.

One or two dozen large and one dozen small safety pins.

If binders for the mother are made, they should be of two thicknesses of unbleached muslin four feet long and eighteen inches wide; with the torn sides, not hemmed edges.

The use for the binder is chiefly to support the mother's abdomen—not the hips.

A cheap, new, wood nail brush for cleaning hands.

Two quarter pound packages of absorbent cotton (sealed). One bar of white castile or ivory soap, talcum powder, half dozen or more towels, a wash cloth, bowl or

granite basin, one porcelain or granite dish to hold one quart of water. Four or six ounces of olive oil, one pint of cider vinegar. A kettle full of boiled, hot water; several soft binders for the baby—five inches wide, and half yard long; either woolen or cotton as preferred. One or two soft woolen blankets in which to wrap the baby.

Three dozen diapers, made of any soft goods (not cotton flannel) thoroughly washed, boiled, and ironed (not starched); in fact, every article of clothing for mother or child should be thoroughly washed and ironed before using.

There should be a bath-thermometer, a hair-brush and comb for the baby, and a wall thermometer.

The Baby's Clothing.

Baby's clothing.

THE clothing for the baby demands careful consideration.

A very young baby may be comfortably dressed in the following manner: A soft, loosely applied binder for holding the dressing of the cord or navel in place; a diaper, a knit shirt (cotton or wool); a flannel sleeveless skirt, and a plain, tennis flannel gown, over which may be worn a very thin muslin or linen dress.

When asleep, a cover should always be placed over the child, its weight depending upon the temperature of the room.

A skirt, and tennis flannel night-gown are sufficient clothing at night.

The usual muslin skirt-band with its gathered ridges should never be made, much less used.

All skirts should be suspended from the shoulders, made princess style, and of the same material throughout; being about thirty inches long, and buttoned in the back. The advantage of having baby-clothes open in the back consists in the fact that they may then be placed one within the other and all put on at the same time,

thereby saving time and avoiding tumbling the baby about unnecessarily in dressing.

Binder for baby's nipples.

After the second day the binder should be snugly, not tightly fit over the nipples, if this is properly observed there will be very little swelling of the baby's nipples.

The navel; granting that the physician has properly dressed it; should not be neglected by the nurse, it should be carefully protected with a pledget of cotton (to act button like) over it, and held there by the binder to prevent rupture.

Ruptures of the navel.

This is especially important in girls; girls are more prone to navel rupture than boys—by twenty in girls to one in boys.

The clothing of the infant should be light, warm, non-irritating to the skin, and loose enough to allow free motion of the extremities; and the bands should not be pinned so tightly about the trunk as to endanger or embarrass the movements either of the chest or abdomen.

The diapers.

Especially good care should be observed that the diapers are not too tight around the hips—this is especially to be observed in girls to prevent a narrowing of the pelvis.

Many of the narrow pelvises in girls may be accounted for in that they were bandaged too tight in adjusting the diapers of the infant.

CHAPTER XVI.

Labor.

WHEN the first labor pains come on, the nurse should be sent for, and, if severe the physician also.

Upon her (the nurse) arrival, she will proceed to make the necessary preparations for the labor.

Care of patient. The patient should at once take a general bath, or if not possible, a sponge bath may be had; special pains should be taken to thoroughly cleanse the lower portion of the body.

A rectal enema (injection), of warm water should be administered to empty the lower bowel.

Upon the arrival of the physician the patient's responsibility ends, as the management of the case then rests with him.

If a reliable trained nurse has been procured—and the infant should come before the physician arrives—which not infrequently happens—the nurse will know what the emergency demands until the physician arrives.

But there are cases which come on so suddenly that the mother is unable to even procure the nurse before the child is born—for that reason it is well that the mother and father know something about taking care of such an emergency.

The preliminaries of course are about the same as described before, only it may not be possible to comply with all or even part of the instructions.

Care of infant. In case the labor-pains become extremely severe before the nurse or the physician arrive, the mother should go to bed and keep as quiet as possible. If neither the nurse nor the physician arrive before the child is born, any intelligent woman happening there, or the father, should place the infant

upon clean cloths, between the mother's thighs, and cover with a few diapers or other cloths to keep it warm, taking care that he or she is in a comfortable position and the mouth and nose clean and exposed so he can breathe freely.

Also look after the navel cord, see that it is not wrapped around his or her neck or thighs—place it so that it does not pull on the child.

Having this cared for, the child may lie there for a half hour giving the physician time to arrive and attend to the rest. In case the mother happens to be alone, she usually can take care of the infant, not so well, but to the best of her ability place it so that no harm will come to it before help arrives.

In case where there is no nurse to be had, or any one who has experience, the procedure as described in the foregoing, can go further, by tying the cord about one and one half inches from the child using a strong string, and again three inches towards the mother and cut the navel cord between those two places. The child is then taken away, and anointed with olive oil, vaseline, or lard, or it may be washed in warm water and dressed.

The after birth usually comes away after a short time without trouble.

Should there be excessive bleeding (hemorrhage) from the birth tract, then a pint of cider vinegar and a pint of sterile water may be boiled together and a clean cloth wrung out of it and placed up into the vagina, it may be well packed into the vagina, high up, so that it will stop the flow. The mother of course should be cleansed, bedding replaced, etc., to make her comfortable.

These last instructions are for emergency cases only.

THE BABY'S GREETING.

"God thought about me,
And so I grew.
But how did you come to us, you dear?

God thought about you,
And so I am here."

"Welcome little stranger, new born—
Springlike and fresh as the dawning of morn;
Dewy sweet as a rosebud, as tender—
Upon you our heart's homage we render."

"O, your Royal Sweetness,
As we kneel at your feet,
Heaven-sent gift our love life to complete;
Rule us with love—for you our Thanksgiving,
Child, you have come to make life worth the living."

CHAPTER XVII.

After the Labor.

The mother needs. THE mother needs careful and intelligent attention from the physician and from the nurse. She should be kept as nearly surgically clean as circumstances will permit.

Only sterilized water should be used for cleansing the soiled parts of her body, and the pads or napkins should be scrupulously clean.

Some antiseptic should be used externally, unless the physician directs otherwise.

Change of pads—no vaginal injections. The sanitary pads should be changed frequently—about every four hours, and the parts properly cleansed each time; the nurse's hands having first been carefully scrubbed with the hand-brush.

There should be no vaginal injections used unless specially ordered by the physician.

The patient's clothing, and the bed-clothing should be changed as often as they become soiled.

As to the use of a bed-pan, the physician should be consulted. When there are no special reasons why the patient should lie on the back, she may change positions as comfort suggests—being careful not to over-strain.

When desirable to be in the erect position, to urinate or evacuate the bowels, especially with fleshy women, a snugly fitting binder should be worn the first five or nine days.

Care of the bladder and the bowels. *The bladder* must not be neglected, if the urine cannot be voided within ten or twelve hours after labor, the physician must be notified, promptly.

If the bowels have not acted by the end of the second

day, a mild laxative should be administered, and this every day or two as occasion demands. A rectal injection of warm water may be desirable.

After labor.

After labor, the mother needs rest and quiet, especially during three or four days.

Visitors, therefore, should be denied her during that time.

Considerable latitude may be permitted in the matter of diet; any easily digestible food that she may desire may be given her in moderate quantity.

The flow.

The lochial discharge "flow" should gradually change after a few days, so that by the end of a week it is not only much lessened in quantity, but changed from a bright red to light rusty yellow. If the discharge lasts longer than four weeks the fact should be reported to the physician. Anytime there should be a chill or fetid condition of the discharge, the physician should be immediately apprised of that fact.

No special time can be set for getting out of bed; in uncomplicated cases, where the abdominal muscles have gained their firmness fairly well, sitting up for an hour or two may be allowed at the end of eight days.

Should not go out too soon.

Usually, women do themselves more harm by undue exertion than by getting out of the bed too soon. Lifting, sweeping, making beds, riding in buggies, or street-cars should not be indulged in during the first three or four weeks, and only moderately during the first two or three months.

After she gets out of bed, and for the first month or two, therefore, it is desirable that upon retiring she lie on her abdomen or face, for a moment, then turn over; this will let the womb drop forward and the intestines behind it, and so help to shorten the round ligaments during the involution of the womb and the ligaments holding it in place.

During the first six weeks after labor, there should be no sexual intercourse—allowing the mother needed rest during this time.

Child-bed fever.

Puerperal or *child-bed fever* is a form of blood-poisoning, and is not due to "catching cold," eating something indigestible or the appearance of milk in the breasts, but to infectious material of some kind brought about by lack of cleanliness upon the part of someone, or a previous infected condition of the patient. The latter condition however if the woman has proper medical attention during pregnancy is extremely rare, and if there is no previous infection, puerperal fever (sepsis) should never occur, if proper care is given the lying-in woman.

A cold may culminate in septic fever; that would be due to the inflammation caused by the cold. Hence it is well to guard against that also; and if there are indications of having taken a cold, administer a dose of castor oil, or some other laxative to open the bowels and excretory organs—a good remedy is 1-2 to 1 teaspoonful of Epsom salts in a glass of water (hot) one to three times a day, and a glass of hot lemonade an hour after each dose. This is better than any other laxative in this case especially when the laity has to decide on what to do—because there is no harm, and, it acts as a febrifuge and antidote against poisonous accumulations caused by the inflammatory condition.

Keep bowels freely open.

The approach of sepsis is usually a few days after confinement, and may be detected by a foul (fetid) order to the lochial discharge and is ushered in by a chill, or state of chilliness, followed by fever, and profuse sweating, and by various bodily pain and tenderness; especially tenderness in the lower portion of the abdomen.

It is extremely important that the physician is notified at once, if for any reason he has not discovered its presence.

Fortunately, few women acquire a severe attack of "child-bed fever," although very indifferent care be given them during and after labor, but this fact affords no excuse for attendants of any lying-in woman making infection possible by carelessness. Even a mild infection, helps to retard the recovery of the mother, and may establish that somewhat indefinite but distressing series of symptoms called "female weakness."

Cleanliness and care are the chief factors in preventing nearly all other ills that may befall the lying-in woman as well as those of the child; such as sore nipples, inflammation and suppuration of the breasts, baby's sore eyes and sore mouth, infection from a foul navel, irritation and inflammation of the child's skin, etc.

Care of breasts and nipples.

The more or less painful distention of the breasts when the milk first appears may be effectively and painlessly relieved by massage, or by frequently stroking the breasts with the palms of the hands—in a rotatory way—begin to do this soon as the least tenderness is noticed. This should be done very gently, and best with oiled-hands, and away from the nipples, especially massage, beginning the process beyond the margins of the glands and gradually approaching the nipples. The mother may be able to relieve these conditions if not severe by stroking them with the palms of the hands, the left breast with the right hand, and the right one with the left hand, and in a rotatory form.

The breast-pump should be used when the child does not sufficiently empty the breasts, and this is a condition that exists in most cases at the very beginning of lactation. Most cases of caking are due to accumulation of milk left in the breasts.

Mothers should nurse their babies.

The importance that the mother nurse her baby need seldom be urged, as nearly all mothers are only too glad to be able to do so. When this is impossible, or when

the mother's milk is insufficient in quantity, and the bottle must be resorted to, for all, or some of the feeding, the necessity for the exercise of the greatest cleanliness again arises.

The nipples and the bottles should be properly cleaned and sterilized before using, and the food must be prepared with the greatest care.

(See chapter on Artificial Feeding.)

Affections of the mother's breasts and nipples.

Leaving aside the infections which, at all events, in their severe forms are now uncommon in the practice of careful physicians, it is safe to say that affections of the breasts and nipples, and their preventives, and curative treatment, constitutes one of the most important problems connected with the management in the puerperal state—(pertaining to the state of childbirth).

Like most obstetric complications, affections of the breasts and nipples are more easily prevented than cured.

Engorgements of the breasts.

This is a simple exaggeration of the distention which occurs normally with the establishment of the milk secretion on the third or fourth day.

The breasts are very tense and hard, and there may be extreme tenderness on pressure which, however, is general, not localized, as in mastitis (inflammation), or to a less extent in caked breast.

The symptoms are due to circulatory excitement rather than simple distention with milk. The breasts feel warm to the touch, although the thermometer shows no rising temperature.

These symptoms usually disappear without treatment in a day or two, but if very distressing to the patient, may be promptly relieved by the simple expedient of emptying the breasts.

As a rule, the baby is not able to accomplish the

task unaided. In hospitals a second baby is often available, but the breast-pump may be resorted to, being careful to avoid infection.

Light massage or stroking with the palm of the hand may suffice.

A breast-pump should be at hand from the beginning to enable the emptying of the burdened breasts soon as overfilled.

Inspissation of milk (caked breast).

The term "Caked breast", is applied to a localized swelling of the glandular tissue of the breast which may be noted somewhat later than the engorgement described above and be due to obstruction to the outflow of milk through the ducts, which may become occluded or swollen.

Treatment.

The best treatment is hot, moist applications and gentle massage or stroking.

Erosions of the nipples (caked breasts).

These are most common and, furthermore, often lead to a much more serious trouble—abscess of the breast.

An erosion is a mere abrasion of the surface, often hardly visible, but extremely sensitive. It is caused by the moisture from the child's mouth, and the flow of milk over the parts. It usually makes its appearance during the first week.

The treatment.

Erosions are not likely to heal as long as the causes which produce them are still operative—the act of nursing.

We remove that by the use of the nipple shield, or let the child nurse one breast for a day or two until one nipple is healed—using the breast-pump during that time, to empty the breast not used by the child.

Faintness.

When the nursing mother feels faint, she should immediately lie down and take a little nourishment; a glass of hot water, a cup

of coffee or tea with an egg beaten up in it, a cup of beef tea or warm milk, or any nourishing food.

INVOLUTION OF THE UTERUS.

After the close of labor the Uterus must be reduced to something like its original size and weight, and be hidden again within the pelvic cavity.

And this is accomplished through what is known as involution of the uterus.

The process is principally one of fatty degeneration, and is caused by the constriction of blood vessels which supply the uterine muscles, and consequent cutting off its blood supply.

This period of the involutionary process may continue during three to six months after labor before it reaches its final normalcy.

The cause of this retroflection of the uterus in the main, is to be ascribed to its weight.

The woman being up and around during the day, and the uterus being heavy, the intestines lighter, the uterus settles back against the rectum, and the intestines come to the front and over the body of the uterus, which will not change its position during the night unless the woman will, at the time of retiring, first lay on her abdomen a few minutes, allowing the uterus to fall, or tip forward, and the intestines come over and behind it, and so hold the body of the uterus in its normal position the balance of the night, during which the ligaments and uterus undergo the most of their involutionary processes to normalcy.

This procedure being observed during the three or four months after labor will insure the prevention of this so prevalent abnormality.

This instruction should be observed at every case of child-birth, because no one can tell that a given case will not need such procedure—and it is a safe-guard.

CHAPTER XVIII.

The Baby.

Care of the baby.

THE baby's eyes must be carefully watched, if they show signs of inflammation, they should be treated with a solution of boric acid and water three times a day, and if not improved by the second or third day the physician must be called.

After the child has been delivered and the mother has been cared for, and made comfortable as possible, the baby who presumably has been oiled and properly wrapped, and put in its crib, now needs further attention.

Should be in its crib.

He or she should be put to the mother's breast, and allowed to take the contents of one breast, and in about six hours that of the other breast, repeating this every six hours until the milk appears; then every 2½ hours during the day and twice during the night for one month, then every three hours, etc.

Later on only one feeding during the night after bedtime will be sufficient.

Should the baby cry before the milk appears, feed it warm water with a spoon or dropper—all being well he or she will spend his or her time in sleep.

It should be remembered that the baby came from a warm climate, and that by nature, its food should be blood-warm, should never receive even a cool drink until after the natural time for feeding at the mother's breast.

Most babies do not get enough water; others are given cold water—that is wrong.

Later on the infant should be fed warm water between nursing, or some time instead of nursing, and from a nurse bottle; this in many cases will keep baby's bowels in proper condition.

Baby's bath. *Tub-baths,* are not to be given until after the navel has healed. A soft wash-rag, "not a sponge," should be used. Mild soft clear water, "previously boiled," and a warm room are most desirable; and no window or door should be opened during the progress of the bath, to avoid draught.

Many physicians disapprove of bathing a baby in water for hours or several days after birth, because they fear that the chilling after a warm bath is more or less dangerous, so soon after birth. They prefer to use at first only warm Olive Oil for the purpose of cleansing the child. The oil is simply applied all over the child, then it is wrapped in warm cloths, held a while, then dressed as in the case of first washing it. This certainly is safer in babies whose vitality is somewhat below normal, and anointing with olive oil is at least unobjectionable even in vigorous infants.

So long as the child's skin remains normal, no powder is necessary, but if chafing or other irritation of the skin develops, a bland powder after thoroughly drying the skin, may be applied.

Chafing. *Chafing* at the genitals may be healed in the early stages by applying sterile (not medicated) vaseline after the skin is dried.

When sponge baths are employed, two waters should be used, one for washing and the other for rinsing off the soap carefully. If this is done, irritation of the skin may frequently be avoided.

The eyes. *The eyes* must be protected from soap, dust and dirt; and should be washed before any other part of the body with clean water.

No perfumes should be used; babies are naturally sweet smelling, and perfumery may be injurious. When preferring a tub-bath, the temperature of the water should always be determined by a bath thermometer and

not by guess, and for the first six months should be 98 to 100 degrees Fahrenheit.

By the sixth month the temperature of the bath for healthy infants may be lowered to 95 degrees Fahrenheit, and by the end of the first year to 90 degrees Fahrenheit, especially in summer.

Older children who are healthy should be sponged or douched for a moment at the close of a tepid bath with water at 70 degrees Fahrenheit.

During childhood the warm bath is preferably given at night.

In the morning a cool sponge bath is desirable.

This should be given in a warm room and while the child stands in a tub partly filled with warm water. This cool bath should last but a half a minute, and be followed by a brisk rubbing of the entire body.

In some infants and even older children there is no proper reaction after the bath, even when given at the temperature mentioned; children being pale, slightly blue about the lips and under the eyes; all tub-bathing and especially cold bathing, should then be stopped; since a continuance can only be a drain upon the child's vitality. It is not well to burden the baby with unnecessary clothing.

The clothing for the infant.

The clothing of infants should be light, warm, non-irritating to the skin, and loose enough to allow free motion of the extremities, nor should the bandage be pinned so tightly about the trunk as to embarrass the movements either of the chest or the abdomen.

The chest should be covered with a woolen shirt, high in the neck and with long sleeves.

The abdominal band is usually worn during infancy. It can not be considered a necessity after the first few months, excepting in cases of very thin infants, whose supply of fat in the abdominal walls is an insufficient protection to the abdominal organs.

During the summer the outer clothing should be light, and the under clothing of the thinner flannel or gauze. The changes in temperature of morning and evening may be met by extra wraps.

The custom of allowing young children to go with legs bare has many enthusiastic advocates; while it may not be objectionable during the heat of the summer, its advantages at any season are very questionable in a changeable climate. Many delicate children are certainly injured by such ill-advised attempts at hardenings.

Material for diapers.

Both cotton flannel and stockinet are superior as absorbents to the more commonly used linen diapers. Stockinet has the advantage of being very soft and pliable. Diapers after having been soiled, should never be dried and used a second time. It should always first be washed. Nor should the *diaper be drawn around* the hips tightly enough to keep it in place on an active squirming baby.

Deformity of the bones of the pelvis may result; and is especially dangerous in girls whose pelvis may be narrowed by tight bandage about the hips.

Rubber diapers should not be worn except on special occasions.

Cold feet.

Cold feet are responsible for many attacks of colic and indigestion.

A cross infant is an infant in distress, and patient and persistent effort may be necessary to find out the cause of the trouble.

Sedatives, such as soothing syrups, paregoric, etc., should be avoided. If constipated, a small glass or rubber syringe full of warm water may be injected into the rectum, if not effective a little glycerine may be added. This method is better than giving purgatives. One of the best purgatives for infants is Castor Oil—but it should not be used often.

Feeding plenty of warm water is often all that is needed to keep baby's bowels regular.

Regular habits. Babies in good health may easily be, and should be taught regular habits in regard to nursing and sleeping, and after four or six months, in evacuating the bowels.

Many babies are made cross by irregularity in feeding; too frequently nursing is apt to make the milk too rich, while, on the other hand, if the intervals between nursing are too long, the milk is likely to be too poor.

Control of its rectum. *Training* to proper control of the functions of the rectum and bladder. It is surprising what can be accomplished by intelligent efforts at training in these particulars.

An infant can often be trained at four or six months to have its movements from the bowels when placed over a small chamber; the chamber being placed under the open bottom of a baby chair; and this should be done at regular times—say after the morning, noon, and evening nursing. This not only saves a great amount of washing of napkins, but the baby soon forms a habit of having its bowels move at regular times each day.

Baby's sleep. The sleep of the new-born infant is profound for the first two or three days, and under normal conditions almost continuous.

Every infant needs a great deal of sleep, and he should be taught to go to sleep in a room alone, and without rocking. If allowed to sleep in bed with the mother, he soon acquires the habit of nursing too frequently—a habit harmful to both.

Babies not to sleep with parents. Another objection to their sleeping together, is, the danger of the child's head being covered by the bed clothes so as to interfere with his breathing.

Fatal suffocation sometimes occurs in this way, especially when a little baby is placed between two older persons.

Jolting, jumping and rocking on the knee, are all bad indulgences, but may easily become habits and the child

learns to depend upon them; these practices are harmful to the child and only betray the lack of nervous control on the part of the nurse or parent.

Care of baby's mouth.

The mouth of the new-born infant should be gently cleaned at each morning's bath with boiled water and a soft cloth. On the first appearance of thrush the mouth should be washed after every feeding with a solution of bicarbonate of soda or borax, twenty grains (1-3 of a teaspoonful) to the ounce of water. Harm is often done by the use of too much force in cleansing the month of infants.

Care of the teeth—the primary teeth especially.

The primary teeth as well as those of the permanent set, should receive daily attention. Dirty teeth are likely, sooner or later to become carious and carious teeth, besides being a cause of bad breath and neuralgia, are a constant menace to the health of the child, due to the infectious germs of all varieties, such teeth should be filled or removed. Lymphangitis, tonsillitis, and even cancerous conditions of the mouth may be due to carious and faulty teeth. "A clean tooth never decays."

Babies' genitals.

Babies' genitals should have proper attention—the boy's foreskin should be retracted over the glands—the physician should do this shortly after birth—and instruct the mother how to do this every week or so when bathing the child. The foreskin should be retracted and excretion washed off. When this is properly done there will be no need of circumcision.

Circumcision not needed.

In girls, the vulva and labia should be cleaned with a soft cloth dipped in warm water and soap—but care must be used not to injure the tender parts—the cloth must not enter the vagina.

Cleanliness of these parts will prevent itching and so prevent self-abuse.

Most of the self-abuse by young children is due to uncleanliness of these parts.

Menstruation in young babies.

Menstruation in young babies—in a few cases girl babies have a slight bloody discharge from the vagina lasting a few days. This is not alarming and needs no treatment except to cleanse the parts two or three times a day with a piece of soft cloth or cotton dipped in warm boric acid solution.

Register the birth of the baby.

Parents should see to it that the birth of the baby is properly registered with the proper officer. The physician may send the report in, but the parents should be sure the record is made.

Weaning and Mixed Feeding.

Many women who are good nurses show a deficiency in their milk, either in quantity or quality, by the eighth or ninth month.

The bottle can here be given with advantage several times during the twenty-four hours, and especially at night, so that the breast can have a prolonged rest.

The rate of gain in weight of the baby and the health of the mother will be the gauge as to when mixed feeding should be begun.

Towards the end of lactation the milk becomes unsuitable in composition. This can be shown either by digestion disturbances or loss of weight, or both, on the part of the baby.

Weaning should be gradual, and as most babies will require the help of the bottle during the latter part of lactation, it is well to begin as soon as possible in giving one or two bottle feedings each day; the baby will then be educated in its use, the mother will have more time to herself, and in case of her being ill, sudden weaning will not be necessary.

If this method is employed, the change from breast feeding to bottle feeding will not cause inconvenience.

CHAPTER XIX.

Fretful Children.

IF the baby is well, has proper care and has not been "spoiled" his business is eat and sleep most of his time. In other words, "is a good baby." But if the baby is fretful and irritable, there is something wrong. He is either hungry, wet, too warm, too cold, or lying in one position too long, is tired; or he is ill—colic or restless from indigestion, etc.

Hence, the first thing to do for a fretful child, is to search for the cause and remove that. His food may not agree with him, he may not get enough water; and by the way, we cannot caution nurses and mothers too often that babies must not get cold water to drink.

Nature has so ordained that children nurse the mother's breast until they are able to masticate food, hence nothing colder than mother's milk should be fed them during that period of life.

Don't dress baby too warm.

Many mothers and nurses bundle up the baby in a warm room so that it will be annoyed with "prickly heat" in winter season. The baby must be watched that it will be warm, but not so that it will perspire.

Many infants take cold after nursing, because they sweat during that time, their hair becomes wet and are so exposed to the air of the room or are laid in their crib without cover over the wet hair and so "catch cold."

Indigestion and colic result.

Then when the baby has a cold its digestive organs become deranged, indigestion results, the food sours in their little stomach and intestines and so colic develops.

The same thing may be said of the changes, the baby is uncovered, the diapers are removed and so exposed to

the cool air of the room, resulting in a chill, billiousness, colic, restlessness and finally, illness.

A baby suffering with colic should be thoroughly warmed and kept warm.

A few injections of warm water with an infant syringe may result in prompt relief.

These are little things, to prevent them, requires some care and trouble, but it is due to this trouble and care that you have a "good baby".

Do not give cordials, sleeping drops or soothing syrups without instruction of your physician. A baby that is restless and does not sleep, is either hungry or ill.

Don't use a coin "Tooth Cutter".

Don't give children under two years of age, peanuts, or any kind of nut candies.

Don't allow a child to run or jump, with anything, even food, in the mouth.

Don't bend over a baby without making sure there is no needle, pin, button or jewelry that may get into baby's mouth.

Don't fail to inspect toys for small parts, such as eyes, buttons or fragments of metal of wood.

Don't neglect to keep the flies away from the baby's food at all times. Flies carry diseases to babies.

Don't excite the baby during or immediately after feeding.

Don't allow the baby to go a whole day without a bowel movement.

Don't fail to protect the baby from flies and mosquitoes with suitable mosquito netting.

Don't let the baby lie in wet napkins.

Don't give the baby a pacifier or mother's comfort to keep him quiet.

Don't keep your child in a room without air. Unless

the child is kept in a room with proper air circulation he will have a pale complexion and flabby muscles.

DONT'S FOR THE MOTHER.

Don't let the baby suck his thumb.
Don't forget your milk to the baby belongs,
To neglect this is the greatest of wrongs.
Don't fail to take exercise and fresh air,
Don't worry, keep mind free from care.
But to keep yourself and your baby strong,
Don't keep him on your milk too long.
After nine months additions should be tried,
Best some cereal and cow's milk modified.

DONT'S FOR BABIES.

"Don't have one bit of hesitation,
Insist on having fresh air and ventilation;
Don't fail to show you're perturbed,
If your sleep and rest time is disturbed.
Don't let people your daily bath ever neglect,
Tell them clean "comfy" clothing you always expect.
Don't let people kiss on your lips,
Don't take from the table tastes and sips."

CHAPTER XX.

Kissing the Baby.

Never kiss the baby's mouth.

EVERY one should be taught that *the promiscuous kissing,* especially on the mouth, is a dangerous practice, and every body should be protected from it; even at the risk of offending thoughtless friends. This needs no further comments—thoughtful persons easily understand how disease can be transmitted in that way. Even if there is no noticeable disease present—there may be infectious material on one's lips that would be capable of infection when transmitted to new soil.

In warm weather, the baby may be taken out of doors after it is a month old—not in cold weather—of course, well wrapped, and his face carefully protected from the skylight and wind; and should always lie down on a pillow, when he gets older and not content in the prone position, he should be well wrapped.

Prevent bow-legs and knock-knees.

The baby should not be encouraged to sit up or walk too soon. His limbs should always have free play and not be held by too long or too tight skirts.

To sit up too soon or too long at a time may cause injury to the spine, and he may acquire "bow-legs" or "knock-knees" from standing and walking on them too early. If he can be content, it will be all the better for him in the recumbent position until he is six or eight months old, sprawling on the carpet.

Baby's sleep.

The prime requisites of children are: abundant sleep and plenty of play. Children should have sufficient quantity of plain and properly prepared food and no stimulants—coffee, beer, wine, etc. They should not be permitted, much less encouraged to

indulge a taste for coffee or tea; cocoa is not much better. Coffee is especially prone to induce nervousness and indigestion, the effect of tea is similar. The principal occupation of children should be play—parents should encourage this, and teach them various amusements.

Early child play. All children should be encouraged to indulge in nearly all sorts of outdoor sports, especially girls. We say especially girls, because it is they who are so often kept away from outdoor play. Training of the mind should always be secondary to developing the body. Many nervous, and physical wrecks are due to injurious crowding of mental development, and crowding at school, while this is true of boys, it is especially so in girls, too often practiced by parents and teachers.

Do you love your children and desire their happiness? Then train them aright.

If you wish their respect and love, desiring comfort by their conduct—live right.

Contentment and happiness is only attained by doing right.

CHAPTER XXI.

Control and Training of Children.

When to begin training.

MANY times the question is asked —"When should the education (training) of the child begin?"

Properly speaking—"The training of the child begins in the mother's womb. After its birth from the first day; especially if it is healthy.

Who does not come across spoiled babies, and what does such one mean?

All who are observers of children have seen many spoiled babies, and they who have given the subject thought know that a spoiled baby generally means a spoiled child, a spoiled youth, and seldom less so, a spoiled adult, and selfish man or woman.

At what age may it be said that the character of the child is formed?

Control of will is the first importance.

This occurs very early in life; and if that character is bad, it is not easily changed. Training of character must begin from the time of birth. The first and most important thing is to control the infant's will (self-will).

When the child learns that undue crying brings the nurse or parents to time—that same effort will be resorted to later on in other matters, and finally form a habit, and so with other features in the infant's life.

Examples of parents.

A little later it will observe the actions of the parents, temper, should not be exhibited even in the presence of children.

Children are close observers and imitators—not the word, but the example of the elders count for most with them.

How may kindness, obedience, and truth be instilled

into the character of children?

First of all, by perfect control of the child's will. Then by the strict obedience and respect of parents for one another in their daily actions—exhibiting good examples.

Give reason for action.

When children commit faults how should parents correct them?

This should be done in a firm, but kind manner; explaining the wrong they have done, so that they understand, much as possible, the justice in the parents' demands; as well as the justice of the chastisement meted out to them.

Do not fail to carry out your promise.

Never threaten punishment or promise rewards, unless it is intended to fulfil—and if found impossible or not prudent to make good the threat or promise, do not fail to explain why it is not fulfilled. That will teach them honor and respect.

How do children learn to tell lies, and how may this be prevented?

Children do what they hear and see others do; especially that which they see and hear in their parents. Parents should never tell fibs to the child, nor to others.

Action of parents in mind.

What the father or mother does in the child's mind, is not wrong for him or her to do. Example, therefore, is the most apt teacher of children who cannot be expected in later life to do as they were told; but rather do as their parents did.

"The apple falls, as a rule, not far from the tree."

Should children be punished if parents are not sure of their guilt?

No: Children should never be punished unless we are sure they deserve punishment, and that they see the justice of such punishment. "Be just to your child, and you may reasonably expect justice in return."

Blows on the head, or "boxing the ears," should never

be administered as a way of punishment. Many, through such inflictions, are injured for life.

How to guard improper companions.

How may parents guard their children against improper companionship and correct bad language, etc.?

Parents may do this by their own selection, by guarding their own company as an example, and by guarding their own language; by reasoning with, guide and instruct their children; by being interested in their companions, talk with them about their plays, their manners, etc. Retaining their confidence; when they come home with some untruth or bad language, not scolding them, but rather explain the impropriety and evil effect those habits have, and that those who use such talk must be avoided.

Parents especially mothers, should be in full confidence with their children; especially when the child gets a little older he or she needs a confident, just as do adults, to whom he or she can confide all his or her experiences. The mother especially should be the one that the child will talk over things that come in its mind (good or bad), so long as the parents have full confidence of their children, they have an opportunity to guide them aright.

To some one the child will go sooner or later—to be guided, it should be his or her parents.

Children should account to parents.

Children should be encouraged, yes, they should be taught to give an account of all that transpires at their plays and of their companions, and in order to do this wisely, parents must take a deep interest in their stories, secrets and experiences.

Never scold them for wrongs they may tell about, but explain their harm or impropriety. If they are scolded for things they confess, they will soon learn to keep those things to themselves, or worse, they will tell them to a companion in whom he or she has confidence, and so things will go from bad to worse, even to dishonor their own parents.

When the child is too young to understand—it may be well not to correct him or her in things he or she does not know to be wrong—dismiss the subject for the time, or steer him or her clear of the association.

The mother must be the best, and most confiding friend—a friend that can be approached with any subject and advice sought. At what age should parents guard their children against sexual abuses?

Guard against sexual habits.

This should be done from early child-hood, even in latter infancy—though unknown to the innocent.

Many of these abuses are due to uncleanliness, if not diseases that cause itching of the parts.

As soon as the child begins to use its fingers, to allay apparent irritation, investigate the cause, and if found correct, it is imperative that these habits are corrected—but with kindness; at first it may be well that the child is not told of the gravity or meaning of such errors; more especially if he or she does not know some things about it, or was not told by others.

But if discovered that he has, then by leading him on, learn what he does know—correct those things that should be—considering the circumstances—and teach him the error and danger of such practice.

Example as to how.

In very young children there are ways and means to be adopted that correct such things in a roundabout way—for example by not showing that there is anything very grave or peculiar about it—but that such things are nasty, etc.

One of the most important things, however is, confidence and privacy.

A child's private faults should never be paraded, corrected nor spoken of in presence of others; and this becomes still more important when a third party does not know the child has been discovered in its deeds.

Children of both sexes should not be allowed to sleep

in the same room, but especially not in the same bed.

Observe indiscretion.

If the least indiscretion is discovered in a child with regard to sexual abuse it should be put in a room by itself, or in a room where he or she can be under parents' supervision. Much of this can be avoided by proper bathing of the sexual parts; by being careful, lest by roughness in bathing an irritation is set up in these organs. This and uncleanliness may induce sexual abuse.

The nurse may ruin children's morals.

May not unscrupulous servants be a source of these evils?

Unscrupulous servants should *never* be permitted to handle the children, and parents should be careful that the nurse is worthy of their confidence to be trusted in these matters—mothers cannot be too careful.

What may parents teach their children about their sexual organs to protect them against error?

Parents, especially mothers should tell their little ones and impress upon their minds that these parts are to be used only for throwing off the waste of the system —the water and fecal matter—and that handling them without necessity is not proper, is unclean, and will cause sickness.

She should warn them against talking about these things with other children, and even among themselves, ask no questions of other boys or girls, because they would not tell them the truth—but come to the father or mother for information on such matters.

Encourage them to ask their mother about all such things, and when they do so, give them a kind and patient hearing, and advise them correctly *according* to their age and circumstances present, their need and ability to understand; never let them depart unsatisfied, or discouraged to come again. This, however, to be properly done, requires fore-thought, study and kindness; things that parents should fit themselves to perform.

We should never forget this simple remedy.

Let us never forget that the habit of self-abuse in very young children is mostly acquired by neglect and uncleanliness of the parts. In boys because the prepuce (foreskin) is not properly retracted and cleaned.

This then attended to, relieves all desire to scratch or rub the parts.

In the early training of a child—
A parent should take pleasure,
To train him up as a tender vine;
And nourish without measure.

Not indulge his or her every little whim—
Tho' he may not think it kind;
He will, when raised up call you blessed
As it for his or her good she'll find.

As the tree is, so are the branches,
And by care their blossoms form;
Protected from the wind and weather—
They blossom brilliantly in the morn.

So may our ways carefully moulded be
Before budding into light;
Protected from the world's temptations,
Be prepared for to face the fight.

Life's road will then be smooth, not rough—
And we will blossom as the rose;
Protected from life's snares and errors—
Stand erect and face the foes.

CHAPTER XXII.

The Problem of Morals in Children.

THIS brings us to the problem of morals in children; as a problem of far greater significance than most parents are willing to admit, and one that means more than any other interest for our children.

Notwithstanding the importance of this subject, we have no way of instructing parents in this ardent and essential duty incumbent upon them—that of educating and training their own children.

Cause of woeful failures.

Most people without giving the subject thought, are of the opinion that it is a natural problem that all can do, and needs no special instruction, study, or talent; and this may be set down as the cause of the woeful failures in the complete education of children in so many families, for, certainly the foundation for a moral education depends upon the father and mother, the home; their example and influence for good or evil. "As the twig is bent, so the tree is inclined."

Those parents who can depend upon the parochial school to help have a great assistance; religion being the first and main requisite for moral training in all its phases.

The sexual morality.

For want of space, however, we shall mainly dwell upon the sexual morality in this chapter.

We, now come to the time when the child is a little older, more inquisitive and in more danger of physical and moral contamination. It need not surprise one to find some parents adverse to continue this study further. It certainly is not a pleasant subject, and not an easy one. Yet, this is one part of the parents' duty that

cannot be avoided without neglecting one of the most sacred of all their obligations.

There are many subjects, although distasteful, which are necessary and important, require discussion, and upon the discussion of the subject depend the lives of thousands of individuals.

Within recent years we hear much about the prevalence of tuberculosis, and how we may protect ourselves from the ravages of typhoid or yellow fever, malaria, defective drainage, etc. Topics that are anything but pleasant; yet, thinking people welcome such topics as necessities of the day.

BE THE CHILD'S CONFIDANT.

Be your child's confidant.

It will not be amiss for us to ask ourselves the question: How is it that parents lose the confidence of their children?

The mother who tells her child that she is not going down town, and then slips into the next room to put on her hat and coat—goes on a shopping expedition—does not realize that she is taking the first step towards shaking the child's confidence in her, and yet such is the case.

No matter how young the child is, it will not be long before he discovers that he cannot always depend upon what the mother tells him.

Do not tell fibs.

Again there are many mothers who have made it a point to always tell their children the truth, but who are finally brought face to face with a problem so overwhelming to them that unthinkingly, they break away from this rule and tell their first lie to the little one.

The child who has been coming to his or her mother with every question concerning his or her world about him or her, and now, in the innocence of his little heart, he comes to her with another query on a subject which is to him of the greatest interest. But the mother not un-

derstanding just what is in his childish mind, not knowing just how to answer the question he is propounding, meets him in such a way as to shake his confidence which, up to this time, he has had in her.

Be candid and proper.

Then comes a child to his or her mother with the greatest question of: "Whence am I?" He wants to understand or learn about his own origin; where he came from, and how he came to be in the world.

And his mother meets this desire for knowledge with an untruth, half truth, or that which to her mind is symbolical truth, but which to the literal mind of the child is but little better than a falsehood. Sooner or later the child discovers that his mother, has not told the literal truth, and that is the time when he begins to lose confidence, and begins to keep things to himself or herself. He has discovered that she does not treat his questions seriously; therefore, he will not take these questions to be answered by her.

Be sure you know your child's mind.

Information that he can pick up in one way or another, along these lines become his which he keeps to himself. So little by little, it comes about that the mother knows nothing of what is going on in her child's mind, hearing nothing of them, she thinks that he is not only ignorant but also innocent. She fondly dreams that because he no longer asks questions about these things, he has ceased to think about them; whereas he is simply silent because he has secured information from other sources, which he does not feel compelled to share with her because she refused to give the knowledge sought at her hands. This policy of silence and of refusal to give the children the information in response to their honest questions, may well be called the social habit.

When a parent, especially the mother has lost the child's confidence, it has been through some action of their own. That is the saddest of all, that so many moth-

ers lose the confidence of their children. *It is all a mistake on their part,* and when they finally awaken to the fact that they have lost one of their dearest possessions; the pain is all the deeper, because never, at any time have they wanted to lose it.

In his or her confidence is your safety.

We know of no greater protection for a child than of keeping his or her confidence. If your little boys or girls feel that they may come to you with any thought that is presented to them, you are then enabled to know just what forces are being brought to bear upon their *unfolding character.*

When they come to you with a story relating to these or any other matters, if you are wise, you will not, as some mothers do, say to them in indignation: "Don't bother me with such nonsence," or, "don't ever speak to me again upon that subject." Instead you will draw from them all they have seen, heard, or said about it; also from whom and through what sources, etc. Then you will proceed to take the poisonous parts from their minds, by proper instruction, and by your own inspiring and uplifting words erase from their minds wrong impressions, or guide them to proper thoughts.

Thus they will come to you again, and you may always protect them from such poison that otherwise might penetrate their whole thought of life. *This will lead them to refuse to listen* to such words from their playmates; and you will so be able to retain their confidence and love which they will take with them wherever they go.

What is the real question?

The question is not—"Shall I tell my child or shall I leave it in ignorance?" *But, the question is*—"Shall I tell my child the truth in the right way, or leave him or her to be told by someone else, and falsely?"

What is really meant—the whole truth.

When we say that the child should be told the truth, we do not mean the whole truth. The child-mind is not ready for

all the facts in life. Nor do we necessarily mean that the child shall be told that which some may have in mind being told him or her. *But when the child asks questions,* or brings up subjects, no matter of what phase or character, that is the time when that question, or that subject must be answered or explained in a proper and intelligent way—if not possible or proper, then explain to his or her satisfaction, suitable to the point and age of the child; so as to guard against erroneous impressions, and so will prevent him or her seeking information from other *sources.*

In later years.

Having thus laid a foundation, parents will readily retain confidence.

It is during the years just preceding adolescence, that children are in need of a confidant; and the confidant should be one of, or both parents.

When parents have retained the child's confidence during childhood, and have succeeded in his instruction, then there will be no difficulty to continue to do so during adolescence.

Parents should not expect their children to ask questions about these matters; they must be on the alert, and at the proper time bring such subjects, even before the child may think of them so that the parents are sure to instruct the child, before companions are able to poison his mind.

Joyful as is the infant to parents,
So woeful are children by them mistrained.

CHAPTER XXIII.

Sexual Discipline, or Companionship, its Dangers, Moral, Physical and Religious.

The physicians' insight.

AS PHYSICIANS we have an insight in many conditions that otherwise would not occur to us. And strange enough, the greatest of dangers to youth—yes, even young children, are some of the places which should be for their protection.

Which of those places would the reader have in mind when connected with this subject, may be considered as one of the most insidious dangers for our children?

One of the most potent places and opportunities that may be sighted according to report, next to the public street, is the public school.

Look — harken — see.

Some of our readers may be horrified at this statement—but look—harken—and see before you judge. The experiences are so appalling, and numerous—to sight only a small percentage would fill volumes.

In justice, however, to the reader, and to make the statement more effective, and for the enlightenment, as well as protection of those who doubt such to be true, we shall cite only a few instances.

Moral dangers in school.

One of our experienced Judges, Julian W. Mack of the Juvenile Court of Chicago said: "What strikes one in the juvenile court-work in connection with this problem is the amount of sexual wrong-doing among the very young girls and boys from seven and a half years up; girls diseased at nine years of age, girls in groups at a school, one group of seven or eight girls, from ten to thirteen years, led by one girl, indulging with boys in that school;

another group of six or eight high-school girls in a suburban town in this county inviting boys to their homes when their mothers were out; another group of three or four girls from ten to thirteen and the leader, the youngest, a child of ten."

The same Judge also tells of various other cases of similar character, and then says: "But do not deceive yourselves for a moment, do not believe that it is only the children, we will say, in the Stock-yard Districts, or some other district where people are massed together in great numbers because of their poverty, who do these things. They occur in the schools which your children are attending and on the streets on which your children are playing." This is of Chicago and suburbs, and many may think Chicago is an exception, when in reality it is the general rule the country over.

There are some who claim that when boys reach the age of fifteen, they should have the physician instruct them in plain language, and warn them of the awful penalty they must pay if they trespass and impair their personal purity. Others that social hygiene should be taught in school—things most irrational. While there can be no doubt that it would be well for all such boys to know that moral transgressions are most invariably followed by physical penalties; we should have in mind that almost invariably, those who wait until their boys and girls are fifteen years old, "have waited too long."

Warnings to parents.

The schools of our day are in many ways most dangerous for the youth of the present day. Recent investigations and transpirations in various cities of this country have brought these things most forcibly to mind.

Mrs. Chapman in "Moral Problem of the Children," among other things says: "Mothers, as a rule, know practically nothing about the moral conditions of the public schools, but the teachers could tell a great deal that would enlighten them did they but dare."

Dangers in school.

To further emphasize these dangers, you are referred to a few of the cases that recently came under observation of the author. A school girl of an unquestionable family, eight years old; history, infected by playmates; a boy of four years, the only child—smart as a whip, infected by neighbor-girls; a little girl of seven, was infected by an older brother who goes to school.

We need go no further—the scandals recorded in the public press are enough to horrify parents—but, they comprise only a few of those that come to light. These narrations are written to warn parents to be on guard as to the behavior and environments of their children.

"By his inclinations a child is known, if his works be clean and right."

CHAPTER XXIV.

Social Dissipation in Children.

Great dangers at adolescent age.

ONE of the greatest dangers to the morals—is the child and adolescent age—and when we notice the laxity in some parents we need not wonder at the outcome of so many boys and girls.

Mothers too lax.

There are mothers who even encourage social dissipation in children scarcely in their teens; a practice which tends to undermine their health; and their innocence—one of the richest sources for "aching hearts" for parents, and in the future that of the child's.

This phase of the social sphere cannot be too well guarded.

Mothers fear their daughter will miss her chance—that can best be guarded against by keeping her in her place at all times. The girl who learns well—the duties of the household, and social functions as a secondary consideration—need not want for desirable companions when it is time for such company.

Remember—"The young man who is looking for a doll-wife, is a dangerous man for your daughter."

CHAPTER XXV.

Mothers and Fathers Should Instruct and Train Their Children in Morals.

REMEMBERING that: Education alone will not improve morality.

It requires the right kind of education, example and training.

In the foregoing chapter are only a few of the unaccountable cases that we offer as examples, but is ample to answer the question: "Why should a mother instruct her children on these questions?"

Why mothers should instruct their children.

Then we come to the question: "When, how, and at what age should the child receive such instructions?"

As soon as prudent and observant parents find they need them.

Boys and girls left too long in ignorance may prove disastrous not only morally but also physically.

Boys may fall into the hands of unscrupulous teachers of vice, and may be driven into desperation or even to suicide; because they think themselves the victims of incurable disease.

Girls left too long in ignorance of their coming into womanhood or womanly development many times render themselves invalids for life. On the other hand, even little children are initiated into solitary vice and led to look upon this part of their nature as a source of selfish pleasure instead of being taught that it is given to them but to hold in trust for future generations.

It is the mother's God given duty to guard and instruct her children. It is the mother's privilege to do this, and she should see to it that the boy and girl will not learn them first from companions. There is no one

thing that a mother can do that will bind her children more closely to her than instructing them on these facts—*if done at the right time and in the right way.*

When to begin.

When instruction should commnece, and how that should be done, of course, with many may be quite a problem. Circumstances and conditions must be the guide in most instances. Prudence, however, is the first requisite; intelligence and experience tells us that no time is too early when indications are present, and often we do well to look for indications—a child will usually and unconsciously exhibit signs that are plain enough if parents are not too careless or love-blind to see them as such. Some think that the child is too young to know what this or that means—but it has feeling—and that feeling grows more acute as it is agitated, and if continued never forgotten.

Use prudence.

The proper time.

To tell the story or give instruction, should as a rule be when the child asks the question.

The fact that the question has come to his or her mind shows that he or she is mentally developed to the point where he or she could understand *that portion of the story of life* for which he or she has asked, or, he or she has been brought to the knowledge of it by some external source (by some other children for example).

In either case, circumstances have made it prudent to give the question careful and full attention.

With many the question arises; cannot these questions be put off?

If, every time the little boy or girl asks a question along these lines, they are told that it will be answered later in their lives, the whole subject gains an undue importance in their minds; their curiosity is not only unsatisfied, but aroused.

The subject gains importance.

They wonder what there is in this subject that dif-

fers from everything else. All other questions are answered when they are asked—this alone is postponed year after year.

If the child is in normal intelligence he or she, begins to try to find the answer elsewhere, if by no other source, than by piecing together what can be overheard from their elders' sayings, and in this way, without any wrong instruction, arrive at a wrong apprehension of facts as they really are. Then, when the story is finally told to them, it may appear as simply confirming what they already heard, or deducted for themselves.

The most lasting impression.

The well known fact, that the most lasting impression made upon the child's mind, is the first one, should not be lost sight of.

That the child has already been instructed or gained knowledge on questions that should first be taught by its parents, causes a necessity not only of the task of telling these facts in the right way, but must endeavor to erase, *"if they can,"* the misconstructions the child has already acquired. You may be able to save your child from actual harm, but on the other hand may never be able to rid him or her of the notion that for some reason or other these facts are not altogether pure and proper. At any time or rate we should strive to assure ourselves of making the first impression upon the child's mind as the first impression is the strongest and most permanent.

Answers should assure earnestness.

This can be achieved if we are watchful, and when the question is first asked, in all earnestness, and with due respect, answer it in sincerity and prudence.

To further help the reader we shall cite a case later on in this chapter.

Should you always wait for the child to ask the question before giving him or her information on these questions?

That depends upon the child. If the child is one who

speaks his or her every thought, it would doubtless be safe to wait, but, if he or she keeps many things to him or herself, and is not given to asking questions, then a different course should be followed.

Should children have some instruction along these lines before they are sent to school?

Instruct before sending to school.

Yes: At least to some extent, and according to their age, etc. Things that they should know to enable them to steer clear of bad influences. It is hardly possible for a child nowadays to become one of a large group of children, without hearing something which points to the questions here under discussion. At least instruct them to the extent of coming to the mother with stories "Good or Bad," so that she may properly direct the child. Much depends on how the mother treats such tales or questions. If after listening to them she explains that such things are naughty, and that good children should not talk about them—the next time such things come up, the child will show its disapproval, and tell them her mother said good children should not do that or talk about such things.

Should parents know or learn that their little boy or girl has already heard things that are improper or wrong, the task may be more difficult, and a little story may be a pleasant leader in such cases.

It is told of a mother that from indications, she took notice that her son had already heard talk of things along this line. She having become convinced that she ought to give him the right instruction "But hardly knew how to attempt it."

Finally she prepared two glasses of water, one fresh and clear, the other very muddy. Calling her son to her, she said: "My son, I want to ask you a question: 'What is in those two glasses on the table?' "

He answered, "Why water?"

"Will you take a drink from that?" said the mother, handing him the muddy glass."

"No," said the boy in indignation.

"Why not?" said the mother, "Isn't it water?"

"Yes, but it is muddy water."

"Will you take a drink from this other?"

"Of course I will, that's fresh and pure."

"Now, my son," said she, "I want to tell you some facts of life. You have heard something about them at school, but it's muddied truth. What I shall tell you will be clear, pure truth. You may choose for yourself which you will believe, which you will make a part of your own being."

The boy, now, saw the point of the object lesson and was glad to make as wise a choice as regards the truth, as he had made concerning the two glasses of water.

With the many—the question is—"How can this instruction best be given?"

Some writers claim that it should be in the form of the story of the life of plants, animals, and birds; and so come to the human family. This may be a good way, and in certain cases may be the best.

However, the average child knows more about himself or herself than about flowers, plants, etc. And will ask concerning his or her own origin before becoming greatly interested in the lives of plants and birds.

Be posted yourself before attempting to instruct.

There need be no fear of shock to the child's mind if the facts are told wisely, and without any particular form of introduction. However, it may be well that the mother post herself somewhat in these matters.

To the child the whole world is a wonder and difficult to understand.

The story of perpetuation of species from the lowest form of life to the highest may be of help. This will help to look at the matter from a more important standpoint, it will show the plan of creation, as we know it in the human world, it is not limited to the human family, but

permeates almost the entire creation.

Mothers who are not able to take up the study of the lower forms of life, may give illustrations that are simple and to the point *if need be.*

This is important.

The whole matter may be taken up not as a thing to be ashamed of, but one that is of utmost importance. The only question is, is it rightly thought of and rightly considered?

We here may illustrate this more plainly by example.

A mother who found it necessary and right to instruct her inquisitive boy because from the questions he asked, she thought he was ready for the first part of the story; and proceeded about as follows: So when he came with the question—"Which part of me grew first, mother?" The reply was—"There is not any part of you that grew first my son; you just grew all at one time." That question came several times and was answered always by the same answer.

When a year older he began to ask more pointed questions concerning the problem as to how he came into the world, and where babies come from? As occasion did not seem favorable for confidential converse she put him off by promising to explain to him later when he was better able to comprehend such things. So sometime after that, one evening when putting him to bed, he repeated his question, and it seemed to her a suitable time to answer it. "Where did I come from, mother?" he asked.

She finally must instruct him or her.

"Well, my darling son, do you remember that bird's nest that was outside our bed-room window last summer?" He remembered it. "And do you remember that I told you there were eggs in that little nest? And that the mother-bird was sitting on them to keep them warm?" Yes, he remembered that. "Then by and by, and we saw the father and mother-birds feeding them and do you remember that I told you once that chickens came from eggs?" He remembered that also. "Well,

darling, you came from an egg, too, but it was such a little bit of an egg that if I had it in my hand, you could not even see it. Now, you can very readily understand that if such a tiny little egg came into the world, it might easily be lost and it was too precious to be lost. So God has made a little room for it, right inside of mother's body. You remember you once asked me which part of you first, and I said there didn't any part of you grow first, you grew all at the same time. Well, my son, you see, in the first place you were such an egg, and that little egg began to grow and divide, and subdivide and divide again, and by and by two parts pushed out and began to look like arms, and another part pushed out and began to look like a head, and, by and by there were arms, legs, hands, and feet, eyes and nose and mouth. Why, there was a whole little boy. And all this time it was inside of the little room which God made for it. And mother knew it was there, she ate for it, breathed for it, and took long walks that it might be strong and well; she made little dresses for it, and dreamed about it, and prayed for it. Some times, as the baby got a little larger, its little head or foot would knock against the wall of the little room and mother would feel it and know it was a message from her little baby telling her that it was well and strong. And she would send loving thoughts to it in reply, and she would think with longing of the day when she might at last hold it in her arms and look into its little face.

"For nine long months the baby lived in that room and belonged to the mother as it did to no one else. And then, when the little baby was large enough and strong enough to live its own individual life, the door of that little room opened and the baby came out into the world. It cost the mother a great deal of pain and suffering when the door of that little room opened, but she did not mind that at all. She was so happy to think that she was to see her dear little baby at last. And she never

forgot the first time she saw her baby either. The doctor had told mother to keep her eyes shut—because you know as I told you, it was very hard for mother when the door of the little room opened—she just couldn't keep her eyes shut any longer. So she opened her eyes just a little bit; and there stood grandma with her baby in her hands, and the baby was crying just as hard as he could cry. And do you know mother didn't mind that the baby was crying, for that meant that his lungs were working, and his heart beating, and that he was going to live and grow up to be her own darling little boy." You can imagine how the little boy's eyes grew bigger as he listened to the fascinating story of his own life with his mother. And maybe you will be interested to know what his first question was when this story was ended. "Is that little room still there, mother?" he asked in awe stricken tones. "Yes, darling, it's such a wonderful room I want to tell you more about it. When the little egg first begins to grow it is in a little bit of a room, and then, as the baby grows, the room grows. And now comes the most wonderful part of all. After the baby has left the room, it begins to grow small again, until by and by it is just the same size as it was at first." His next question was also interesting as shown by the trend of his mind; "Whose room were you in, mother?" "I was in my mother's room, just as I am your mother, and that's what being a mother means."

These are simply illustrations; but parents should employ their own methods.

The Mother and Son's Secrets are Theirs Only.

When satisfied the child will drop the matter.

THIS mother then goes on and tells how for several days questions concerning this story would come to his mind. She having told him that this story was just for them two (the mother and the son), and when he came

with his questions she made him ask them in a whisper, and when no one else was in the room, because as she would say, "We don't want anyone to overhear what we say about this story, it belongs to you and to me." And it was interesting to notice how quickly his questions once having been answered, the subject dropped out of his mind.

It takes its place with other facts of life, which, as soon as they become more or less familiar to him, drop into the background as a part of the things which he will tell you when he is older, "I have always known." We must, also, remember children must have one in whom they may confide—that should be one or both parents.

THE FATHER'S PART.

The father's part.

THUS far we have spoken only of the mother in this part of their duty. It may be that the father is called upon to take the mother's place. Whatever is required to accomplish the end—the work must be done. When possible the father should enter in part with the mother in this duty. Father and mother should agree on all matters, but especially on training their children right. When it is considered what it will mean to the boy or girl to know that his or her father thinks reverently of these significant subjects; and has high ideals of personal purity, and believes that living up to them is not only possible, but is the true expression of manliness and womanliness and virility. Then as the son or daughter grows older, he or she will naturally go to his or her father with more of his or her private problems, feeling sure that father will understand, and knowing that what father tells him or her is absolutely true.

What this means to the daughter.

Moreover, what this also means to the girl as she is growing older and is sometimes horrified by the revelations that life's experience brings her of the depravity and

wickedness of some men, to be able to recall her own father's tender words, his wise counsel, his pure life. She can never lose faith in men so long as that memory remains with her. Later on, in the child's development other questions arise which the mother finds still more difficult to answer and those are in relation of the father to the child. *We must again remember that the child does not desire* detailed physiological information, but simply an understanding of the human relationship. And this may be exemplified by the same mother as follows: "Well, my son, that is another momentous story. You see, father and mother are just two parts of a whole. It takes both a father and a mother to make a complete home, doesn't it? You have to have a father to be strong, brave and true; to protect your mother and yourself, to provide food and clothing and shelter for both, and for the children. Then boys and girls need to be strong, brave and true as well as tender, careful and loving. They need to be like father and mother, and so they are. Do you remember that I told you, that there was a part of mother in that little egg that finally came to be you? Well, there was, and there was also a part of father in it, too. God made it necessary for a part of mother and a part of father to unite in order that that egg might grow. There is still another reason why there must be father and mother; while mother is carrying the baby and making little clothes for him, and keeping well and strong so he may be well and strong, it wouldn't be possible for her to earn all the money she needs for herself and little one, and so that is what father does. He earns the money and takes care of the mother and protects her."

Doesn't always need details.

Then in certain cases it may be well to further inform him that when the baby comes into the world not only does the mother suffer physical pain, but the father suffers mental anguish, because he sees the one whom he loves so much suffering and is unable to do anything to

relieve her. He even does not know but what the mother may be taken from him at that time. This you see shows that your coming into the world has cost both your father and your mother a great deal and that is one reason why they love each other so much. This then gives the child what he wants to understand, what it is that binds father and mother and child so closely together; and realizing what it cost his parents; and by going still a little farther with him showing what it has cost them from then and is still costing to raise him to be a good man. By this his love is deepened and he better understands why they are so anxious to train him in things that are good. It must of course be borne in mind that all these questions, answers, and instructions must be considered in accordance with the child's age, and environment, and the child's world. No two children can be taught alike, and therefore no two children should be instructed alike on subjects like these, in presence of another, except in case where the question comes up in presence of both, or in presence of a group, and then, a suitable answer or explanation should be given for that occasion only, and if they are your own children with a promise to explain the subject more fully some other time, and then they must be taken individually, with strict privacy between parent and child, admonishing the instructed that these are things that are no one's business except that of the child and the parent, and should not be talked about with any other person. In this way the parents have a right to anticipate, and will, have respect of his or her child; also that the child will have respect for the sacredness of these questions, and will not feel interested in talking with others about such things.

That which binds father and mother together.

According to the child's age.

Never before time.

Knowledge of this kind should never be thrust into the child's mind before it is asked for, or when there are signs

that the child's mind begins to be occupied with these questions. This often takes place very early in life, due to being smirched by children. When the parent concludes that the moment has arrived that if he or she does not speak, someone else will, then he or she must say the word solemnly and plainly. Impress upon the child's mind the importance of the sexual mysteries; and that when the child wants to know anything about it, it should ask the father or mother about it, and not other people.

May not need detail.

Ordinarily, if the matter be thus solemnly but openly treated there will be no need to go too much into details. The child will make its own inferences, which will be substantially correct. At any rate, enough for the time being. But be sure that the child has been satisfied and that he is your confidant.

For parents not schoolmasters.

To the parents and not to the schoolmaster, still less to boys and girls, belongs the duty of explaining sexology, and what is meant by being born. This knowledge is sought for, and possessed, long before the knowledge of how children are begotten. Parents are inclined to be too reticent about these things, with the result that children get their first knowledge from undesirable sources. Let reason, then, decide that the parents say what is essential, and at the same time let instinct decide that they shall not say more than what is essential.

There is no need for a full and particular description of the conjugal act; neither of pictures and diagrams of the human body.

After the age of thirteen or fourteen the boys will claim more particularly the attention of the father, and the girls, their mother. Now is the time for explicit teaching on certain well-defined matters along sexual lines. The boys as they get older must be warned against venereal disease. The terrible natural effects should be

pointed out, and should be assisted with the divine law as natural punishments due to sins.

Religious training of Importance.

Judge John C. Karel of Milwaukee says: "Seventy per cent of the boys brought before me were victims of parental neglect and had no affiliation with church or Sunday School.

This subject is further discussed in other chapters of this book.

"Train up a child in the way he shall go; then when he is old he will not depart from it."

(See Children in Their Teens.)

CHAPTER XXVI.

Children in Their Teens.

When they grow a little older.

AS children near their pubescent life, of course, other questions will arise. This is an important age for youth—both boys and girls.

The neglect of observing and properly instructing them at this age, may be disastrous for their physical as well as their moral life; when discreet instruction would save them from harm. If all has gone well so far, well and good; but from this time there is much more need to guard them, to avoid missteps henceforth.

The precaution should be as in the past; however, they are older and more experienced, and having wise instruction so far, are now ready to receive detailed instruction as to what now is expected to develop in their own lives.

Details are now needed.

They will want to know their own structure, their relation, etc. This information of course cannot be given fully in this book; but from what has been said, most parents can provide or formulate their own stories and mode of instruction for their boys and girls on these questions as they arise; remembering that these instructions are to be given to each one separate from a third person, that inculcates a respect that is lost by talking of these things in presence of others.

Avoid vague ideas.

The first thing will be to apprise him, or her, of the change which is to come. If the parents have given the earlier instruction, they are expecting this. If not, they as a rule have a vague idea from what they have picked up or such as has been taught them by other children; which is usually not for their good. As a rule mothers

of the present time appreciate the necessity of enlightening their daughters as to the changes which are to come, and the way in which they must care for themselves at that age. But, a large proportion of the parents—fathers and mothers—do not appreciate the necessity of instructing their boys. Yet, the need for the boy is just as great as it is for the girl. There will be physiological experiences which the boy will not understand; and these may lead him to seek through advertisements in "newspapers," and books, and through quack doctors, learn to believe that he has become infected with some horrible disease. This is a frequent coincidence with the boy of good and hopeful parents, who do not instruct their boys in early life. They having acquired bad habits (masturbation, etc.) and are easily trapped by advertisements of lost nerve powers, etc.

Boys need instruction from parents.

To avoid advertisements and bad company.

And again, the boy will be advised by older boys, who know too much; but equally little of what is proper, and so obtain information which may lead him not only to physical but also to moral ruin. So it is plain that the boys need teaching on what is to come to them as well as the girls.

This is the time when the boy especially needs his father's instruction and encouragement. His father is a man, and to the boy's mind, must necessarily understand the experiences of the boy who is soon to be a man. Therefore, all else being equal (the boy having confidence in his father), will go to him with a greater freedom, who can give him priceless help to overcome his temptations and make his fight for a noble and clean manhood.

The boy needs his father's instruction to overcome temptation.

However, if the father will not, then the mother must, and not let a false sense of modesty keep her from performing this her necessary dutv.

This time is a time of sacred trust.

This is the period of life in which to impress upon the minds of children more strongly than before that the creative power is a sacred trust, and a gift bestowed, not alone for their own selfish gratifications, but particularly for the sake of the continuance of the race.

This is the altruistic period of life, when such an appeal penetrates the consciousness most effectively, and at this time, it is most necessary to make known some of the evils that are in the world; and the evils that result from the misuse of the sexual powers. This should be done cautiously and plainly, so that it will not be misunderstood by the children. If parents are not able to do this themselves, then have the family physician do it for them. The future health of the daughter or son may depend upon this point.

The future health.

It may not always be necessary to go into details that would shock the young mind; but, as they know there are those who are gluttons, those who misuse the taste for food, they should also learn that there are those misguided individuals who misuse other instincts for their own selfish gratification.

The gravity of such transgressions may be apparent when we think of the diseases resulting from the misuse of the sexual organs, and of the fact, that the human being is the only animal so punished. No other creatures are subject to such diseases—the fruit of misused sexual powers.

No more boy's rights than girl's.

Furthermore, the boy should be taught that he has no more right to abuse his virginity than the girl. We should impress upon the minds of our sons the vital necessity of purity of life in themselves; and upon our daughters the responsibility that rests upon them to require

purity from young men with whom they associate, as well as the men require it from the women.

SECRET AND SACRED.

Secret and sacred. NOT only should these questions between parents and child be regarded as secrets between them alone—but also sacred.

Why? Because upon that confidential discussion these matters do not only depend the moral but also the mental and physical health of the children.

To substantiate this phase of it—we need only refer to the mental and physical wrecks at large, and so many of those who are confined in the insane asylums—due to mistakes of their younger days—and to wrong or absence of teaching on these questions.

"An immoral pleasure
Is Satan's treasure."

CHAPTER XXVII.

Sexual Hygiene Not to be Taught in School.

The class - room no place for sex-hygiene.

FROM what has been said in the foregoing it will appear plain that these instructions are not fit for the school-room.

The school can only teach morality in a general way —and of course, watch the children in social and moral conduct—and see that they observe ordinary rules of justice and decorum.

The parents are the ones upon whom this duty rests —and who can give them a fundamental training along these lines. The school can assist by teaching them in the ordinary rudiments of life—based, of course, upon morality and justice—this then helps, and in a way perpetuates the work of the parents.

Proper education a help.

Should, however, the necessity arise that children cannot be instructed by their parents upon certain subjects, then the services of the physician, or one in whom they can implicitly trust should be sought. The school should be a great help to parents in the moral training of their children, by teaching them all respect for authority. But, sex-hygiene and eugenics are not within the province of the public school, nor to be taught the youth of any age in class.

CHAPTER XXVIII.

Young Men and Young Women, Their Companions.

The greatest problem.

ONE of the greatest problems now arises.

After the age of fourteen or fifteen years young people begin to think of "company" with the opposite sex.

This usually is not so trying on the parents if the earlier training was in all respects successful.

Many parents are too easy on their charges, or rather, they do not wish to be troubled with the young people around them, and are pleased when they choose their "own company" and associates.

Is wrong and unwise.

This is an error; parents should assist, and at times govern in the selection, and their movements.

Young people should find no place more interesting than their own home, especially at night. Parents do wisely in making the home attractive for their children. They should see that their children are about them early in the evening—and when out know with whom they are.

Parents should not retire without the son and the daughter are in bed. It is mostly in these late hours that harm is done through undue familiarity.

The parlor dangerous.

Never allow a couple to remain in the parlor or sitting-room after the balance of the family has retired. When it is time for the parents to retire, it is time for the lovers to retire also.

Not to go in pairs.

Young men and young women should not go out or receive company in pairs until they are of marriageable age; and then only in company with one or the other of their parents, or with spe-

cial consent, and information of where they will go and with whom.

Buggy or automobile drives—cause for regrets.

It is not wise to let young people go buggy or automobile riding in couples—this is a great source of scandal at least. Parents and guardians should be strictly watchful as to where they go, and if it is true they do go where they claim to spend the evening. How many parents have cause for grief over the consequences of their son's or daughter's company Yes, how many parents have been so sadly disappointed by their darling son or daughter, because in their estimation they could trust them without chaperon. Do not venture!

These and similar rules are the only safeguards parents may depend on.

Should some not be able to recall object lessons to justify our advice—then let them ask any experienced physician. He can tell you of the sons and the daughters whose parents would trust to be alone with "Any young lady, or any young man; but especially with that young lady or that young man."

Engagement no cause for privilege.

The fact even, that they are engaged to be married does not alter the case—to the contrary, that makes it more important—that they should be careful. They should avoid being left together in a room or lonely place. The vast majority of the sad endings; the numerous scandals are traceable to these mistakes.

CHAPTER XXIX.

Boys and Wild Oats, a Sad Mistake.

Most deplorable custom.

THE idea that boys are expected to pass through a time of hilaria—to "Sow their wild oats"—is not only a sad, but most deplorable and wanton mistake.

We admit that this "phrase" does not always refer to abnormal liberties, but too frequently they are included! And, by common usage almost are excused.

Why should a young man have more right to a virtuous girl for a wife, than a girl to a virtuous man?

These are dangerous privileges.

Is it not the diseased young man that infects the virgin wife and causes her misery perhaps for life, and sickly offspring? Due to what? "Wild oats," of course!

It is but right and just, that parents so instruct their boys—talk with them an in their presence of the wrongs that are committed by cruel and unclean boys—beginning gradually from their tenth or twelfth year—or younger (if inclination indicates), to respect other boys' sisters just as they would have other boys respect their own sister—if they have one. Parents can do this in a most effective and judicious way. The other necessity to save girls from danger is, that parents of other families are encouraged to follow the same rule with their boys.

Begin early in life to save late horrors.

Great missionary work.

Here parents can do a great missionary work; a duty they need not fear to talk to neighbors about—or still better to tell them where to get this book. It might be well to discuss the subject to some extent, which will arouse an interest in this important subject.

"Look at it on what side you will, and I will defy you to make anything but a devil's maxim out of it."

These virtues are worth more than silver and gold—or good books.

Far better your daughter never should marry, than to marry a man of sexual depravity or disease.

Too many demand purity of women, but are themselves impure—point out deplorable cases to the young.

We find only too many men who demand purity in the woman, but do not make an effort to be pure themselves. Then there is the glutton—the man of excesses—his training was not what it should have been—no parent should feel satisfied that their daughter is even in such a man's company—and no girl should recognize such as fit company even in public. A man addicted to one excess is quite liable to others. But he may reform—dare you to risk that?

Here is where parents can help by pointing out deplorable cases—where a girl thought she would reform the man after marriage—but never did. Educate them to shun any man that gets tipsy from drink, or goes with doubtful—especially doubtful female—company. That not only teaches their own children to realize that such is disrespectful and unworthy of man, but, it helps other parents in their efforts to rear their boys and girls right. If there is anything in the social line that tends to reform young men, it is the fact that they are shunned by the better classes of both men and women.

Avoid false notions.

No woman should indulge in the false notion that she can train and reform that man after marriage. Past history shows that almost invariably the reform is not only not realized, but turns out to be worse than before, and ends in dismal failure for both.

These are vital questions and should not be considered lightly. But think of the misery and endurance with a wayward wife; or a wayward husband, indifferent if not abusive; besides the example that such a life is to the children and the neighbors.

CHAPTER XXX.

The Baby of the Family.

The first and last born.

IN a large proportion of families there is one who is the "baby." In some instances it is the only child; in others it is the first born, but, ordinarily the youngest; and when there are a number of children, but only one boy or one girl in the family. So, also, where there is just one girl and one boy. The girl becomes the favorite of the mother, and the boy of the father, and vice versa. Such cases of preferments and favoritism are anything but beneficial to physical or moral well-being. The presumed good to such children invariably proves great harm to the mental, physical and social conditions of the family.

Selfish and tyrannical.

These are what is known as the spoiled babies—not learning to control their will and passions—they grow up to be selfish, irritable, and even tyrannical in their ways.

Such mistrained children (all history verifies this), when the time comes that they should be the idol and support—are a thorn and a torment to their parents—and scandal of society.

Will not end in childhood.

If this would end with childhood it would not be so harmful.

But, the habits once acquired are seldom wholly eradicated—they remain not only during childhood, but during their life.

Furthermore, physical weakness and illness that otherwise would not be—due to selfish habits. It is from among these we have the vast majority of our hysterics and hypochondriacal forms of "crankiness." And people who cannot get along with others—and are even a source of trouble to society.

Thoughtful parents will not pamper their child; that means punishment or torment in later life. In reality, instead of good it is cruelty to the child itself.

Lack of good and sensible training to that extent causes regret in later life.

"A young man according to his way, even when he is old, he will not depart from it."

Do you love your child?

Is this not a strange question?

Should we not put another question?

Do you love your child aright?

These are vital points for every father and mother.

We need not ponder long to realize that the parent who idolizes its child and so fails to control its will, shows a wrong love for the child's good.

Parental indulgence due to false love, is the cause of mistrained children.

Parental indulgence (false love) is accountable for the heart-aches so many children cause their parents.

"Undue indulgence bestowed upon the offspring in early life, reaps oppression and disrespect for their parents when they are grown up." "If you love your children, train them right."

"He that spareth the rod hateth his son, but he that loveth him, correcteth him betimes." (Prov. xiii-24.)

CHAPTER XXXI.

Marital Responsibilities for Candidates.

Impress upon the mind of the young.

THIS is another important proposition in which parents should be interested, and in which parents may be of unestimable help to young people. They should advise with them about the responsibilities that those who marry must assume.

They should speak to their sons and daughters concerning these things long before it is time for them to marry; then they will study them before it is too late. They should know this to enable them to make a rational choice, and not only of person, but of the state of life. Whether to marry at all or not.

Lay great stress upon its importance.

Parents should impress upon the young son's mind and upon the young daughter's mind, that the married state is an important one. It involves not only the prospective father and mother, but their offspring as well. They should talk to them about what it will cost to keep a family; and, that a family they must naturally expect. They should also speak of the single-life pleasures—and that these would be replaced by manly and womanly cares—the cares that a household demands. And that those who study these things before they marry will not be disappointed, and so be able to bear the burdens.

Young people should be warned of the foolish if not criminal idea that they will have no children for a while.

Use illustrations.

Show them through illustrations of current happenings, that it is far better; yes, thousands of times better, never to marry than to become a party to race-suicide—or even be disappointed because the married state of life is burdened with unexpected responsibilities.

Such difficulties may be avoided by judicious refer-

ence to some of these things from time to time; even children should be apprised of them; but particularly during their pubic state. The example, when a case of poverty, etc., is found in the neighborhood; speak of it in the presence of the youths, show them the mistakes that have been made by those people. If possible refer to the fact that those would be better off if they had not married, or had waited until they were better able to carry on the expense of a household or found more suitable partners —or as the case may be—such illustrations to children become object lessons which they later will observe.

Better never marry than wrong.

It shows them that it is really better to never marry than wrong, or under improper circumstances. Show them also that single persons can live happily, and that they are better off than illy-married. Also that not only do such married people live unhappy, but their children and kin with them. It is in this way that such instruction will make proper and lasting impressions on their minds and put them on their guard. Children who are so instructed are impressed with these things and will invariably when the time comes for their own lookout, act wisely.

Children will follow early impressions.

If parents would have children that in later years become a credit to themselves, their parents and the state; they will begin to train them from earliest infancy; and continue to do so every day as they grow up, but especially by their own sincerity and model in life. No parents need expect obedient and true children, who do not live an exemplary, true and obedient life—themselves.

The child will not do as told—but will follow the example it observes in its parents. "What the parent does, the child will do."

Mark you—there should be no so-called "baby" in the family—treat all alike.

When life is lived along these lines—life is worth living, and no sacrifice is too great.

CHAPTER XXXII.

Candidates for Marriage.

ALL candidates for marriage should have a clear conception of what it is they contemplate; what they are bargaining for—as all know, there is always "Two sides to a bargain." Candidates should know that there are duties and responsibilities as well as pleasures in the married state.

The mistake is that a large number do not rightly take this into account.

Parents from their experience and superior knowledge should bring these matters to the attention of their children long before their contemplation of marriage. It is well to speak of these matters already to children in their eleventh or thirteenth years; that their minds may be trained to prudence along these lines. Then when they become young men and young women their minds have already been set to be cautious.

This then will enable the young man to realize beforehand that marriage means for the man to provide for the sustaining of a home, and in the natural course of events —children.

The girl that she must be subject to her husband in all things right; or there cannot be unity of purpose or happiness.

The prospective husband should know that he cannot at all times, nor would it be well, to have all his own way; that it is well at times to give way, one to the other; that his marital duties will require him to be at home more than if he was not married, and should find enjoyment more in the company of his wife and family.

That his first duty is his wife and children.

"Oh! they wander wide who roam, for joy of life from home."

The prospective wife should be taught to keep house for her husband and self; be prepared to cook, clean, wash, sew, and make the children's clothes; if not her own.

That by the very nature of marriage she must take into account that there will be children to care for and to rear.

She, also, should be taught to look on married life as assuming duties pleasant and unpleasant; that life embraces health and sickness, joy and sorrow; sweet and bitter; in truth—as the son of Sirach says: "God hath made all things double."

The instruction of parents in these matters should begin early, so that when children reach the age of uncertainty, they are prepared to combat temptations.

Some parents purposely refrain from talking to their children on these subjects as being likely to cause them to fear entering the married state at the proper time, and to speak to them about the bearing and rearing of children in the married state as being improper; that to speak of hardships would discourage them. This is entirely wrong, our daughters should not meet with any surprises in married life that can be avoided, that can only be done through proper instructions before that time.

CHAPTER XXXIII.

Sexual Discipline.

WHEN parents have been fortunate in training the young child, when it has learned obedience, respect, and to confide all things to its parents.

When the child has been trained and has acquired self-control—control of its will, its appetite, its temper and inclination of every kind during early childhood; there will be little trouble along the lines of sex discipline.

The school age.

During the grammar-school years, the sex discipline gradually changes. The child begins to be monopolized more and more by his, yes, and by her companions.

Careful investigation shows that not more than one out of ten children reach the age of twelve without a complete, although often unwholesome, knowledge of the facts connected with human reproduction.

It would be strange if this were not so. When books, newspapers, the dictionary, encyclopedia, poetry, art, posters, advertisements, fairy tales, mythology, and conversation of children are full of these themes. It would indeed, be a blockhead who would not investigate them and acquire some measure of information.

When the sexual nature awakens, dress, customs, pictures, and a world of sex ideas are at hand to stimulate it.

Unwholesome self-consciousness in regard to these topics will be slow to mislead a wisely-instructed boy or girl. It is those who have been baffled in their search for the knowledge to whom the period of extraordinary sex-hunger is most difficult to overcome.

The mistaken delay of instruction.

The parent who thinks it safe to wait until the child has reached the thirteenth or fourteenth year, immediately facing their personal problems will generally be dismayed to

discover that the son, the daughter, regards it as a joke that anybody should be ignorant upon this vital theme.

The child who arrives at this age and has been refused the needed information by its parents, can have but three feelings which are possible: first that of forgiving, because of ignorance of the need of such instruction; second, that of good-natured contempt which results if the child has suffered no harm from being denied its right of knowledge; third, that of cynical bitterness and suspicion if harmed by this neglect.

We still have those who object to these instructions on the ground that some boy or some girl, in ignorance of these facts, "whose curiosity might be aroused and who might be led into bad things" by such instruction. These saintly youths exist largely as a figment of the imagination.

"It is a crass delusion, to believe that any boy or girl can reach the age of fourteen or fifteen, unless imbecile, who has not acquired a pretty good idea of, the reproductive processes." Author of pamphlet published by the Indiana State Board of Health.

To postpone meets difficulty.

To postpone information makes it more difficult. In later boyhood or girlhood it meets shame, in the child as well as in the parent. It is unnecessarily abrupt, and is apt to be isolated from the other facts of life.

Confidence in the parent not only makes the child or youth believe what the parent tells, and turns to him or her for more light, and gives him or her courage to bring to him or her, his or her failures as well as his or her questions.

Parents must accompany the child through boyhood and girlhood, endeavoring always to retain their confidence, answer their questions, emphasize unmistakably by their conversation and conduct the noblest personal ideals, and, above all, try to live sympathetically near their child's level.

Towards the end of childhood, towards the beginning of puberty, the father will notice that his son tends insensibly to turn toward himself rather than his mother, he realizes that it is "getting to be up to him," because they two are of the same sex-consciousness.

CHAPTER XXXIV.

Sexual Habits and Vices.

Self-abuse.

THE habit forming periods in the children as generally agreed among those who have studied the matter closely, are three; each of which has its individual characteristics. These are—roughly speaking—the years before nine, the years between nine and fourteen; and the years after fourteen; or, the primary years, the grammar-school years, and the high-school years. But, so far as the needs of information and need of guarding the child is concerned, there are but two periods. The years before the sex-nature awakens, the years of general preparation, and the adolescent years, when the matter becomes a more personal problem.

The three periods of early life.

As to boys—It is generally agreed that the proper person to guide or discipline the child during the first period is his mother; during the second period, his father and mother; and during the third, his father. Dr. Ira S. Wile, who gave this much study names these periods as follows:

"First—The age of mythology.

"Second—The age of chivalry.

"Third—The age of civic awakening."

Which are excellent distinctions, and appropriate to each of these periods.

Too late to train in self-control.

"The boy in the first period needs facts; in the second, a wholesole development of his emotions and imaginations; and in the third—self control." This reads well: But, if self-control has not already been instilled into his character before the second period, in the boy as well as in the girl, it will be a difficult task to master it now.

Hence, the importance of developing self-control from earliest infancy. (See the chapter on "Control and Training of Children; also The Problem of Morals in Children.")

Instruct according to age and circumstances.

Naturally, the information to be given along these lines is about as follows: During the first period, as to the decorous, sanitary care of the excretory parts, and, in answer to questions concerning the origin and reproduction of life, should be in accordance with circumstances; but mostly, evasive replies will satisfy children during that age.

During the second period, the child needs more careful instruction—as to the desirability of clean thoughts and wholesome physical living.

Later on, as to the development of the generative apparatus (organs), the naturalness of seminal discharge in the boy and periods in the girl, with such reviews as may be needed by previous instruction.

During the third period, as to the regimen of self-mastery and chastity, the chivalrous attitude towards the opposite sex, the peril of the sexual plagues (diseases), and then special instruction for marriage.

(See articles in this book on these questions.)

CHAPTER XXXV.

Abuse and Misuse of Sex-Organs.

AT FIRST it is development and possible abuse and misuse of the sex-organs that parents are called upon to guard against in their children. This cannot be too closely watched in both sexes, and that from the earliest childhood.

If these habits are successfully observed and subdued in early childhood, then parents will find little trouble to instill self-control in later childhood and in the adolescent age.

Parents should not forget the danger of environment.

We after all must not forget that, boys as well as girls, may be misled by their elder associates; and that is one of the great problems parents must deal with; especially is this the problem of the mother. The boy, however, needs particular attention on account of his greater danger, his nature, and environment.

To the normal boy there is nothing more earnestly desired than to be a virile, abounding type of man, and the thought that he has the power to become such by conserving his own resources is one of the strongest stimuli towards self-control. This positive attitude is one of the best antidotes to the common dereliction of boyhood habit of handling the personal sex-organs.

A few sane words.

A few sane and reasoning words need be spoken concerning this difficulty. Parents ought to know that the habit is practically universal, at least as an experiment, that it is practiced with some frequency by the great majority of lads, but that its occasion and results are somewhat misunderstood with boys.

It usually has its origin among uninstructed boys as

an expression of curiosity concerning the function of this organ, and that the first occasion is quite often the result of the accidental discovery that is pleasurable.

Sometimes it is learned by imitation, and, therefore, sleeping with other children and unwatched familiarity should be avoided. In all these cases it begins innocently.

To endeavor to check it by corporal punishment is only to incite recourse to it later for comfort, and merely to scold a child about it only to puzzle him. Fear may drive the lad to despair, or, later to other forms of impurity.

Physicians of today are not emphasizing the physical harm of this practice so much. They rather think of it as a nasty habit, and as a shameful, selfish indulgence, a kind of arrest, limiting to some extent the "nerve," the ambition and the stamina of a growing boy.

It appears to be common, not, as we may have supposed, among the most vigorous, but among the weaker sort, which perhaps explains its prevalence among the feeble-minded.

Refinement is not a barrier to it, since perhaps it is equally prevalent among those who are softly nurtured, over-fed and indulged. Its availability encourages its development, and its secrecy prevents detection or vigorous prevention.

Numerous methods of prevention and cures may be applied, all positive and inspiring. Athletic ideals are almost a panacea, when accepted as voraciously as they usually are by normal boys.

Remedies for self-control.

To get a boy "good and tired," is a help to make him literally good.

In general, we are trying to postpone the aggravation of sex-impulse.

Preoccupation, business, the sense of responsibility, are all allied self-preservative motives. The broadest thoughts of manliness, ambition, and self-esteem must be encouraged.

Instead of threatening the boy with fatal results for misconduct—which of course may be urged as one of the reasons for a pure life—we should try to cause him to a sense of joy of being clean. The best motive of all—is, to build his continence on the lasting foundations of self-control. The boy who is greedy today will almost surely be sensual tomorrow.

Selfish ideas and unwholesome views.

The idea that man's sexual function was given chiefly for personal enjoyment leads to a selfish and unwholesome view of life. To this type of a boy the habit, instead of being, as supposed a substitute for fornication, leads directly to it in later life.

Most important self-control of function is now.

The importance of regarding the matter seriously at all, is right here; self-control of this function now—as of his whole being, is the only adequate guarantee of a lifetime of pure living. The parents of course must help. Let them do so by hustling the youngsters (early out of bed), as soon as they wake in the morning and keep them busy all day. In this way they will get them over the two danger points—the early morning, when there is a tendency to languor and sensual dreaming, and the evening, when they who are not healthily sleepy are again subject to temptation.

It is the father, of course, who must look after the boy, especially in later boyhood; but he should not accuse his son of evil, but rather infer that he expects nothing but good of him, and whenever he instructs him, he must do so not in a superior way, but rather with the knowledge that the fight is one which he himself knows all about. That it is manly to overcome these tendencies, and that all depends upon a good-will and self-control.

CHAPTER XXXVI.

Parental Responsibility Unquestionable.

PARENTS upon you depends an exceedingly great responsibility in the training and instruction of your sons in regard to their sexual functions. Harsh though it may seem to say it, the neglect of which is to your children little less than a crime.

As the boy approaches the time when the instincts and promptings of manhood begin to be more distinct, he needs especial parental help; he should be prepared for this change—he should be warned against the many dangers and temptations—false teachings, practices and examples of associates, etc.

He should be warned especially at this age against masturbation, and all excitement of the sexual organs. But very few parents instruct their sons *sufficiently of* the dangers of the beginning a wrong life at this age. The danger is almost invariably due to the fact that the boy had not proper instruction—he does not know what to do and what to avoid, and so is extremely liable to fall pray to habits that will be hard to discontinue or overcome.

The only instruction most boys get on these matters is from associates—and nearly always wrong if not vicious. They realize the mistake when it is too late, but regrets are unable to rectify the mischief.

Sons need parental counsel.

The son who has not proper advice or counsel of a wise and watchful parent, in his early life, becomes a companion of fast and loose companions, a victim of disease, and a menace to society—especially of the pure and the innocent. Such sons are advised that such habits are but natural and necessary; no wonder they are led astray.

Sons should be instructed in time—that such indulgence are always to their injury—physically and morally. They should be taught to avoid all sexual indulgences before marriage.

They should be assured that indulgence is not needed for their well-being—but that such indulgence is the cause of much misery and disease, insanity and crime.

Boys should be trained to realize the need of, and their ability to control their animal instincts.

Boys should be trained to realize that through their selfishness they cause irreparable injury to their victims. That these acts bring on misery and suffering to thousands upon thousands of women. Parents should impregnate their minds with the truth, that their selfish momentary and unlawful gratifications, are not only debasing, but they often become accessory to despoliation of life, if not the cause of murder.

Boys should be trained that they do not commit acts which are of the most degrading to the human race.

The Prerequisite in the Care of the Infant and Child.

Care of Babies' genitals.

TO BEGIN with, and in order to fully realize the fundamental principle of child training along these lines we must begin these with the care of the babies' genitals.

The babies' genitals—both sexes—should have proper attention.

The boy's penis needs careful looking after from the beginning—the foreskin should be retracted over the glands. The physician should do this shortly after birth, and, instruct the mother how to do this every week or so, when bathing the child. The foreskin should be retracted and the secretion washed away from behind the glands —penis. If the waste-material (the secretion), is allowed to gather within the foreskin and back of the glands

it will cause irritation, itching, and, in many cases ulceration and disease. This irritation and itching is the principal source which brings on masturbation in very young boys.

Circumcision not needed.

When that organ is so treated circumcision is seldom needed, and should not be performed unless it is especially indicated. The prepuce (foreskin) is by nature intended for the protection of the glands.

The girl needs equal attention.

In girls, the vulva and the labia need careful attention from the earliest time of life. The folds between the labia need cleansing every week at least. In these also gather not only secretion, but often waste from the colon. This is a source of irritation, which often causes itching, chafing, ulceration and sometimes infectious diseases.

These folds should be cleansed with a soft sterile cloth on the finger, dipped in warm water or in soapy water. This should be done at least once a week, or as often as is found necessary to keep clean.

Care must be taken that no pressure is used—that the finger, nor the cloth penetrate the vagina—the hymen is very tender and easily injured, besides there should be no foreign material pressed into the vagina.

It is the neglect of the little girl's genitals, and the consequent irritation and itching that is one source of learning the habit of self-abuse—masturbation.

Older girls.

Girls of four to fourteen may become afflicted with vaginal discharges, simulating specific disease—due to infection from secretions accumulated in the vagina or in the vulvular folds.

This may be due to Catarrh, decomposed accumulation of smegma,—a creamy substance, which is decomposed and becomes pustular.

Moreover, exfoliations from Measles, Scarlet fever,

or other infectious diseases, may result in such symptoms; and it may be caused from masturbation.

Treatment of the ulceration.

R. Sod. borate dram. II, Glycerine ounce I, Aquae rosae q. s. to make VIII. Mix and apply with a pledget of cotton three times a day. If it will not improve prmoptly, consult a physician.

CHAPTER XXXVII.

Seminal Emission.

THIS is one of nature's phenomena which does not need to be discussed with the boy, or rather, which does not need to be communicated to the boy until about the end of puberty, unless it is noticed that he has acquired some knowledge of it through companions. But, we should be quite sure to warn him in time, of the naturalness of the occasional emission that may occur. This phenomenon is to the uninstructed boy as is the first menstruation to the uninstructed girl, and is calculated to be as great a shock and terror. He should be taught that these discharges, if moderate in frequency are not a sign of weakness, that they are a natural phenomenon in the healthy individual. It is his ignorance in these matters that tends to abuse and misuse of his organ.

The way to Quackery.

Later on, he will read advertisements, and procure literature which deal with these matters, and so becomes the prey of quacks, and scare-mongers which are ever on the alert for the ignorant.

Medical remedies, are not needed, the boy should be kept busy; encouraged to read good literature and associate with moral companions. He should be taught the danger of thinking about, and handling these organs.

Teach him of the false idea to use no medicine or any other remedial methods to quiet these sensations.

Warn him of the false ideas which the unlettered may prescribe, such as bathing in cold water, the application of ice, etc. These and similar things are all means that tend to bother his mind and tend to stimulate these impulses. That is not all; they are mostly dangerous to health. Rather train him to divert his mind by taking a

walk, reading of good books, practicing gymnastics or anything that will keep his mind off of such matters.

When unable to sleep take deep inhalations.

When unable to sleep on account of this, take about fifty deep inhalations; this will bring sleep and health.

The occurrence of seminal emission undoubtedly is stimulated in an unwholesome way by all habits of self-indulgence, and it is against these as well as the results that we should bend our endeavors.

It is the morbid anxieties and worries in connection with the sex-life during these years which parents must face. The fact that apparently some anxietie and worries do not have this connection, that should not cause the parent to forget that their rise is usually, though obscurely from this source.

The most common morbidness of thought is because of some fancied abnormality of physical life.

His ignorance along these lines, or, because of access to literature of quacks, or, from hints in the conversation with chums; most boys at one time or another get the impression that they are not right physically. And this, because of no education or wrong education on sexology.

The slightest difference of size or form of an organ, a fancied pain, irritation, sluggishness at times, the magnified thoughts of self-abuse, ignorance concerning the seminal losses, as well as the natural excitement, unrest and discomfort of the sexual awakening and well-known "storm and stress periods" of life; are sources of concern to the uninformed boy.

Proper training, confidence and frank communication of knowledge along these lines is one of the most potential safeguards against temptations to immorality in these years.

Further sex-instruction.

This problem as stated before, should be undertaken with regards to needs and age of the child. Actual immorality

among boys during boyhood years is unusual. Hence, it is usually hardly necessary during these years, to give more than an intimation as to the filth-diseases which are the wages of sin, and avoid, as a rule to scare the boy, since continence chiefly built on fear is often cowardly, but to suggest that he avoid, for the sake of God and of the family health, contamination by contact with places and persons who are of bad repute.

This usually occurs because of the advances of older, immoral girls. It is hardly necessary to be reminded that there are communities where the frequency of such perversions is such that parents feel themselves obliged to take precautions and give instructions which ordinarily would not be required until several years later. It may not be out of place to call attention to the fact that at school things are not always trustworthy. There is nothing we can think of that is more dangerous than perverts in a school—and our eyes and ears should be always on the alert.

As to further information.

In general, it is advisable to review the subject from time to time, in some form or other, to be sure that the child has retained clearly in mind the import of the main facts; and that he is free from sex-worries. At least in later boyhood he should know chastely, the main physical differences of the sexes, consonant with their different functions in reproduction, he should be aware that there are unfortunate women who make a hire of their bodies, and men, who are so debased as to prostitute their own powers by unclean approaches to women, and even boys, and he should appreciate the fact, that his mother and sister are periodically in a condition which requires especially tender care, and that the reason his girl playmates at times break engagements with him or seem otherwise perverse, is often due to the same cause. Furthermore, he should learn to avoid the reading of books upon this subject, that his parents have access to all such literature.

He should ignore the would-be wise associates who discuss questions of sexual matters, health, etc., but rather consult his parents who will take an interest in his welfare.

He should ignore literature and advertisements of the advertising doctors, etc. Although it will probably not be possible or even advisable to prevent his talking of these matters to his chums, but this will not be harmful if he can be kept in the habit of talking them over at home.

CHAPTER XXXVIII.

The Religious Phase of This Subject.

A TRUE, considerate, and conscientious physician has of all men the greatest opportunity to observe conditions and needs of the human family; and knows that education including the physical and hygienic training is incomplete unless religion is taught and its practice insisted upon.

Parents are interested not only in the material interests of their children, but also in their spiritual welfare. That is, they are interested in the whole child—the physical and the spiritual. Those who have given child-training fundamental study, in fact those who have studied the human race fundamentally, agree that the welfare of the race depends upon the training of the whole child—the mind and the heart. Hence, the subject before us would not be complete if we did not give the religious phase of training a place in conjunction with that of sex-discipline. For, it is well known that without religion there is no true morality—and that religion is the greatest factor in promoting morality among the people.

It is rightly said that a moral man is a religious man at least to that extent, for, morality is religious.

Importance of right personal habits.

The importance of right personal habits is often disregarded. The fact that they are great in their meaning and that they are distinctly religious in their character is not always appreciated. For example, take some of the personal homely habits and think what they mean.

Neatness, in its deepest sense is respect for work; cleanliness is respect for the body; punctuality is respect for time; accuracy is respect for truth; personal hygiene is respect for the future.

These are not only life virtues, but they are great religious virtues. Of course our appreciation of their importance is naturally greater than that of our children.

Nearly every act of the child in early boyhood or girlhood is impelled by personal advantage or pleasure, but these are not easily apparent in exercising these virtues. The child has not the knowledge to realize what they may mean to him or her in after life, and he or she has not at this time that sense of shame which in after years becomes such a potent influence in causing him or her to conform to the custom of adults.

Imitation, chief factor of character formation.

Imitation is a chief factor in character formation of childhood, the child does as the parents did. Hence, the life of the parents suggests the life of the offspring.

Personal habits of the parents are observed by their children and tend to form their character and habits.

"As in social life, so in the religious. We must not expect too much."

Parental precedence the greatest influence.

We must not expect too much religious feeling from young children. Those who try to make children religious before the natural time often fail; but by the natural and earnest observance of these tenets, these sentiments will become firmly rooted in them by reason of parental precedence and example of life. We may well observe that an earnest and exemplary religious life is the greatest influence and most potential means for the training of obedient and well behaved children, and later honorable citizens.

Religion and knowledge together are two companions for the security of the young man and young woman, they go hand in hand for their future happiness.

Man is Instinctively and Naturally Religious.

Is not and cannot be truely happy and satisfied unless he obeys the command of His Maker.

CHAPTER XXXIX.

Children's Play—Its Value to Education.

"WE CANNOT devote too much space to the training of children."

The play of the young, since the discovery of the spontaneous interests, has become a clue to educational problems; and since spontaneous interest has become a leverage of the teacher in the education of the child, the conscious effort of teachers has been to make the work of the school-room somewhat like the work of the play-ground—ATTRACTIVE.

Play a first class educational process.

There is no absolute dividing line between the two kinds of work. And, this is not all; play itself turns out to be a first-class educational process. The play instinct is Nature's way, and so God's way of developing the body, mind, and character.

Quickness and accuracy of perception; rapidity of thought, accuracy of judgment; promptness of decision; self-control; self-sacrifice for the good of a group—all these products of true education are called out in plays and games. Therefore, the play instinct varies with different species and with the two sexes. So that its specific form prepares the individual for his specific functions.

The plays of the lamb prepare for its activities of a grazing animal; those of the lion's whelp foretell the pursuits and killing of prey.

The plays of the girl look forward to motherhood; those of the boy to acquiring, building and protecting.

"In short, play is a part of Nature's school."

Relation of play to religion.

If the religion of the little child consists largely of the training of his instincts toward good habits, then the

greatest instinct, play, must have a central place in the child's religious development, example, as is well known, appeals to the imitative instinct, environment stimulates and suppresses many, and play creates the child's own world and fits him to it.

What a child is in play he is in his being. Play is free self-expression.

Play is free self-relaxation.

It is complete self-relaxation. It is the chief means of early development.

A child in play pursues an ideal, and we who are older seldom pursue our ideals with vigor, except in the spirit of play. Play, therefore, is a religious instrument of the highest value.

Children's play is generally of two kinds—imitative and constructive. Through imitative play the child follows the example set before him and dwells in a mimic world of his own. Through constructive play he learns to understand this world and master it.

Froebel said, "Because a man is divine, he must also be creative," and that the chief purpose of the kindergarten is to draw out the child's creative powers.

Interests and effort, attention and perseverance in difficulties, all begin to appear in creative play and with the happiest effect upon character.

Symbolism, in the study of religion as in the study of other matters, so in teaching little children to understand God as Creator, is with many most effective through their own occupation in Nature, for example, through the planting of seeds, tending of animals, etc.; through their own experience and personal activity.

Practical illustrations.

Allow us to offer the following illustration: Mary and Ruth, about six years of age, like other children in school, had sown a few beans and peas. Every day they would grub up the earth with their little hands, to see why the seeds did not come up.

In other children's beds little green leaves and sprigs

were beginning to peep above the ground, and these two inquisitive little ones looked sadly at them, and then to their own bed, where nothing was yet showing.

The cause of this was explained to them that if they wanted their seeds to grow, they must be patient and leave them alone for a few days. So every day they visited their garden, and with great self-control, refrained from touching the soil, and, at last, one morning they were found kneeling by the bed in a perfect wonder and delight, at the green leaves which were just peeping up through the soil.

Notwithstanding that they had seen plants growing before, they had paid no attention, because they themselves had taken no part in planting and caring for them. But now, for the first time, they were consciously face to face with the wonder of Nature, yesterday there was nothing to be seen, today little green leaves were peeping through the ground!

"Was it you, children," the teacher asked, "who made them grow?"

"No," said Ruth, "God did it!"

And the teacher told them how God made the sun shine so as to warm the earth, then sent rain and the dew to soften the soil, and so helped the seeds to grow. Little Mary and Ruth were keenly interested. Often duty may be largely done by the child in the spirit of play, as part of some game. Putting away playthings, play-blocks can be made a part of some play. Song and music may accompany a very arduous piece of work. When natural incentives fail, artificial ones can generally be found; instincts can be matched against instincts; aversion can be met with desire. In this, games of matching, the highest instincts and not the lowest should always be appealed to first. Rewards should come before punishments. Deprivations should precede infliction of pain. Only as a last resort and in peculiar cases, like open physical rebellion or cruelty, should the trainer of normal children be

compelled to step down to the physical plane of matching his brute-force against those of his pupils. For, we should remember once more, that the purpose is to make men and women, not merely to attain obedience and get things done.

"It is well," says Mrs. Fisher, "to make a plain statement to the child of five—that he is requested to wipe the silverware because it will be of service to his mother (if he is lucky enough to have a mother who ever does so obviously necessary and useful a thing as to wash dishes herself), but it is not necessary to insist that this conception of service shall uncompromisingly occupy his mind during the whole process."

It does no harm if, after this statement, it is suggested that the knives and forks and spoons are shipwrecked people in dire need of rescue, and that it would be fun to snatch them from their watery predicament and restore them safely to their expectant families in the silver drawer.

By doing so we are not really confusing the issue of fooling the child into a good action, if clearly thinking on the part of adults accompanying this process. We are but suiting the burden to the childish shoulders, and inducing the child to take a single step, which is all that any of us can take at one time, in the path leading to the service of others.

A child who cannot freely unbend in the presence of his parents, or elders, is a witness against such a father, mother or brother. In fact, the freedom of play is a normal element of life and a normal attitude toward life for adults as well as for children.

The home, the most interesting place for boys and girls.

Thus play becomes a natural interpreter of what is highest and last in the problem of our life itself.

Holding this view of play, we should strive, not only to not make children like playless adults, but to make adults like playful children.

Applying this to home-life; where can we behold a more interesting and nobler scheme than in the home, when father, mother, and children mingle in their evening lessons, and then amuse themselves and each other in their evening games? When the children are small, their parents amuse and teach them how to play, when older they form the children's best company. This keeps the boys and girls off the streets, because the home is the most interesting and desirable place for their evening gatherings.

Children's struggles and quarrels.

Play with its fun, its noise, its contests, which center in social or group activities, are the very things that keep play going at the highest.

Boisterousness, struggle, conquest, the taking of risks and facing of danger, are at times proper and truly in harmony with virtue.

Quarrels among children are not to be interpreted as signs of a fall from virtue, but rather as thorns with which the child pricks himself in his efforts to pluck the rose of normal social existence. Childhood quarrels provide them with a set of experiences that enable them to avoid quarreling later in life.

When grown persons indulge in wrath and envy, backbiting and clamoring, they descend from a plane which children have not yet reached, a plane which their early social experience helps them to reach. Thus, an act which in an adult is bad, is not necessarily so in the child.

Error corrected only after it has been committed.

To oppose or suppress them by mere power is to sacrifice development, this does not mean that children should not be properly corrected and admonished by their elders.

These bickerings and quarrels are essentially self-destroying, and this is the very lesson that the child learns from them, during this stage of undeveloped life. You cannot correct error when no error has been committed.

"He who knows not anger knows not how to battle against it, nor how to fight wrong." So, also, of childhood greed and self-assertiveness.

These impulses, if allowed to grow without check, become in time an evil characteristic, that may never be conquered. But, if correctly restrained, or guided as the case may be, they will develop into strength of personality and self-control; power of resistance, power to do and not to do, and power to win in worthy causes.

In the study of the child, we study the man.

"In studying the child, we are in reality studying the man. In studying it, we are enabled to see steps by which the material becomes unerring skill, the finite becomes infinite. 'The proper study of mankind is man,' but he who knows not the child, will never know the man." Hence, a short dissertation on child mind development will be in order. A basic principle in the education of each child is that the senses develop in advance of the reflective powers, so that the first knowledge to be acquired is sense knowledge.

This order represents a general principle of mental acquisition and worth. Not that all realities are sensible things, but simply that realities in some kind of experience come first, and the name, the formula, the theory comes afterward.

A baby in the act of exploring one hand with the other, or handling every possible thing; a child who runs and jumps and climbs and tries to do whatever he or she sees anyone else doing; a boy or girl who is possessed by an impulse to make bows and arrows, or toy windmills; a youth who begins to hear the wind whispering to him or her of a wider experience; a geologist, breaking a fragment from an exposed rock—all these illustrate the same great fact.

The baby is laying up a stock of experiences, whether they are good or evil, temperate or intemperate—which bye and bye he or she will learn to name.

The child is learning Nature's laws by bumping up against Nature.

The boy is expanding his insight by using upon things of what insight he already has. The youth craves to get at realities of life, and no mere telling him about life will suffice.

In each of these cases the symbol, rule, or theory, when it comes will have force and vitality in proportion to the felt reality of the experience for which it stands.

Development of character.

Development of sound character may best be formed by self-adjustment of the child and youth under proper guidance of parents, church, and school; through the various forms of these communities; the home, the church, and the school.

Then again, it is possible to admit the young at an early age to genuine participation in the occupation or daily duties of elders. Children long for opportunities to do things. They watch their elders at work and wish for some part to do: Provided, always, that such occupation brings real companionship with the parent in accomplishing something.

When the child is trusted with money to make small purchases, he feels himself or herself to be a part of the rest of the real world, and to be bound by strong parental ties and to their standards. He develops the habit of living a real life, a life of social responsibility as contrasted with mere caprice or mere impulse; and this habit of living in realities goes farther towards developing solid character than mere instruction and advice. Moral instruction, in fact, becomes significant only as it has some such background, or rather, it becomes fundamental in proportion as it is an integral part of living in the reality of life.

The fundamentality of moral instruction.

Knowing the right and doing right need to be fused into each other.

"Show with whom you go and I will show you who you are."

Fellowship a great factor.

Fellowship then has much to do with the formation of character. If we trace any character, good or bad, to its source, we always find it starting in fellowship.

The young life comes in contact with a wholesome or unwholesome personality, and if contaminated, catches its spirit as if by infection. From the idle gossip of neighbors to the revelry of a saloon, billiard-hall or dance floor. The entering wedge of evil is unwholesome or bad fellowship. The point at which the first step is taken is not solicitation by any coarse motive in its native coarseness, but in the garb of good fellowship, conformity to custom, amiable compliance with standards of other persons. In pleasant atmosphere of fellowship, all the forces of imitation and suggestion work unimpeded upon unformed character to give it completion of its surroundings.

We do not become either good or evil; or either religious or irreligious, by deliberate choice, any plan of education, moral or religious, that depends for success primarily and chiefly upon such choice is sure to let go the golden opportunity.

The great lever for good or evil is fellowship—the charming of life.

Fellowship the charming of life.

Here is where so many under-estimate the importance of parents' and elders diligence in watching over their younger charges. Theoretically the problem of training and educating children is not particularly formidable. Keep the child in constant good fellowship, and away from all other character, let instruction keep up with the growing powers, and the work is done.

The actual tact and skill.

But the practical problem is not so simple. For actual environment of every child is mixed. And here is where

the actual tact and skill of the well regulated family and teacher finds that they must use their wits to effect.

We simply cannot shut up any child to an environment that is completely wholesome; we cannot shut out all of the temptations and liability of a fall. Even if we could compass such a plan, children subjected to it would not be prepared for life in a world like ours.

Importance of confidence.

Here then is where the importance of the utmost confidence between child and parents is apparent. The child should know no one to whom he or she would rather go with his or her confidential questions and ventures than his or her mother or father. When in company with other children he should be expected to relate in detail everything that has transpired between him or her and his or her associates during the day or whenever. It is in these stories of adventures that the parents should take a lively interest, whether good, bad, or indifferent. It is in these where the child may be told what is right or wrong—and how to encourage or discourage further association. The child must never be upbraided, scolded or even reprimanded in a way that will put a quietus to further ventures at the court of his or her parents. If the adventures were entertaining and innocent, make him or her feel that you are interested in his or her interests and adventures.

On the other hand, if the companionship is not as good as might be, then explain in a way to warn him or her, and if possible avoid or discontinue the adventures.

It is in these confidential intercourses and discussions of daily adventures that mistakes and abuses can be discovered and corrected. And it is here where the diction most appropriately fits—"The mistakes children make cannot be corrected unless they make them and bring them to the knowledge of their elders." And again, "Unless the child makes mistakes, they cannot be corrected." If children make no mistakes in the sight

Mistakes when not discovered cannot be corrected.

of their elders—they have no chance to be fortified—their correction and admonition of them.

Terrible then, as the dangers are, the best thing for the child is that he or she should be subjected to the evil as well as the good influences of his or her social environments. This, of course, under proper guidance, within reason, and, along the lines above indicated. Only so comes chance for discrimination, strength of resistance, realization of the world's need, and practical adaptation in the contests for the Kingdom of God.

CHAPTER XL.

The Public Press and Its Influence.

THIS chapter would be incomplete if we did not say a few words on this subject.

The public press' influence.

The public press and proper reading matter must not be left out of consideration in this pursuit. We have already touched not merely upon direct personal influences, but also upon what may be called the influence of the social atmosphere.

A particular instance of this kind is found in the relation of the public press to the formation of character.

In the press public sentiment is both revealed and guided. Here the child imitates his or her elders in forming his or her character as it were, according to the fashion of the day—and of those which other than his or her parents and teachers. This has a special attraction for him or her. Here the spirit of the times or of a party speaks directly to the young without traveling, and without large acquaintance with men; with study, one is made to feel as others are feeling, to judge as others are judging, to desire what others are desiring.

Learn to judge and feel as other people do.

The enlargement of knowledge and broadening of sympathy that have come through newspaper reading is a remarkable fact, and it is a blessing for which we can hardly be too thankful. The newspaper can be a great blessing—it can do a great deal for childhood, and for the youth. But to a considerable extent the press of today is training the young to morally objectionable conceptions of life.

One of the chief interests in the daily papers to boys are games, and then note the kind of food that the sport-

ing pages of the daily papers provide for this interest. Again, what impressions as to domestic life are boys and girls and young men and young women receiving from the representations of it that are constantly found in the daily press?

Here, then is a vital proposition—even older children will imitate their elders in discussing the daily news items—proper or improper. When parents read news items that are not in harmony with good morals, and will simply allude to them in disapproving manner, the youth will by that act learn how to receive such news, and so enable him or her to think aright. In other words, he or she will learn how to form proper conclusions, etc.

The power of the newspaper lies less in what it positively asserts as to right and wrong than in what it takes for granted, what it tolerates without protest, what it habitually presents as interesting reading. Therefore, the child should receive his or her instructions by imitating his or her elders in regard to proper reading-matter, and as to what interest and lessons are to be drawn from such newspapers.

All this tends to form the child's presumptions regarding life.

It creates presumptions or standards with reference to which he or she judges himself or herself and others.

CHAPTER XLI.

How to Make Reading Educational, Profitable and Attain Most from It.

FIRST. "Plan your reading. Select the books to be read far in advance. Prefer books that are old enough to be classical, attractive if possible, pure always."

Second. "Vary your reading. Follow romance with history, history with biography, travel, art, science, philosophy, religion; variety gives breadth and keeps up interest."

Third. "Limit your reading. Know a few books well rather than many books indifferently. Intensive is better than extensive reading. 'Big fish swim in deep water!' "

Fourth. "Fix your reading. To this end carefully weigh your thoughts, talk them over to yourself and with others, try to remember them."

"Thinking makes what we read ours."

Fifth. "Time your reading. Have a book hour each day, if possible. Especially, however, utilize fragments of time for a few pages of reading."

"Little and often, masters the largest volumes."

Sixth. "Enrich your readings. This do by looking up all allusion to history, poetry, art, mythology, persons, places, etc."

Seventh. "Preserve your reading. Own if possible every book you read, mark choice passages in them; make comparisons with them; often commune with them."

CHAPTER XLII.

Eugenics—Birth Control—Prevention of Defectives.

THE teachers of eugenics attempt to prove that by control of births the prevention of unfits can be accomplished.

Men of influence like Dr. Robinson, and others of his way of thinking propose sterilizing as a universal remedy against the birth of defectives.

Sterilize defectives.

He says, "Sterilize defectives in this generation and we will have 50 per cent less defectives in the next."

"Sterilize defectives for three generations and we will have a nearly normal race. This is only his idea, backed by a few others, and these ideas are not backed by any evidence in animal life. Nor does this prove true in stock-breeding. Are there not defectives among stock, which defectives have not been allowed to breed for generations?

Yet, we still find defectives. Hence, this theory at least in so far as evolving a perfect race, is not supported either by evidence or practice.

In making these iconoclastic assertions they do not take into account, the great moral evils which would result from such measures nor their final inadequacy for the physical improvement of the race. They also advocate that the pernicious practice of birth control should be encouraged and taught to the people. What brutality of thought and action would such violation of the natural laws not bring forth?

Result extremely doubtful.

Is it not extremely doubtful whether we could trust anyone with the "ultimate decision" as to which children are

fit and which are not? If we cannot trust medical men with the decision, how can we have them decide the status of a child yet unborn?

All physicians and humanitarians of decidedly sound principles should use every means to combat these radical and dangerous proposals, leading to immoral, unnatural and destructive violations of the natural laws. Race suicide and sterilization will not assist us in the solution of the problem of the feeble-minded and defective.

Segregation and abstention from marriage a means.

Segregation of those undoubtedly defective and abstention from marriage is the rational means to meet this question. The destructive ideas of irresponsibility and selfishness, leading to so many and greater evils must be discouraged and forbidden. Take a "rational" view of this question, and look at the natural outcome, and what do we find? Where is the guarantee that such an act so radical, would be a success or solution of the problem?

For instance: there is a couple who have four healthy children, then comes another, which proves to be a defective. Then, after that, this same couple gives birth to several others, all of which are normal. How can anyone say the doing away or the prevention of such births would improve the race?

Cannot trust in decision.

Dr. Robinson and others of like views would limit the number of children of the poor by preventive measures.

Why? The poor have not any greater proportion of defectives, nor perhaps so many. The defectives, as is known from reports, among the wealthy in proportion to those of the poor is startling. Showing the falsity of this idea that defectives are born more especially among the poor.

But when born, why kill them or what is tantamount to it, let them die?

Defectives have a right to live.

Men who have risen to eminent positions—one or two cases we cite although the total number is great.

An Irish member of parliament of great worth, never had either arms or legs. Cavanaugh, by name, he was an eloquent speaker.

Professor Faucett, blind, became postmaster-general; these and others like them, they say, are not fit to live; let them die. There are many who in infancy are defective in intelligence; but with the right care, together with medical and surgical means may become effective and intelligent.

Means to provide for the defective.

There are means that should be used. Great has been the progress in the practice of medicine in the last century; and greater still will it be in the future.

Institutions will arise backed by wealth and science, for the very purpose of obtaining and treating those who are defective at birth. But at all events we should not take upon ourselves the authority to decide who shall or who shall not have the right to live. We believe in the command "Thou shalt not steal." The same authority said, "Thou shalt not kill."

It is claimed that defectives and monstrosities are due to a great variety of defects in the composition blood of the mother.

Among these may be mentioned the poison of diabetes, and kidney diseases of various types; which leave impurities in the blood stream; typhoid fever and other infectious diseases; causing malnutrition of the ovum (egg), and producing deformed offspring to be developed and be born.

Science has demonstrated that with two substances, butyric acid and acetone, chemicals produced in the blood of those afflicted with diabetes (sugar disease) sugar in the lymph and serum, a great variety of monsters were born in the experience of Prof. Weber on lower animals.

These experiments yielded defectives and monstrosities, some joined together similar as were the Siamese Twins; creations or creatures with open spinals, without legs, neck, eyes; with absent ears or entire face, without tail, clubbed feet, etc. Also that in many, parts of the organs were lost, shrunken or undeveloped, and in others only half of the body developed, etc.

It is claimed that such are also produced in the human by alcohol and other poisons in the embryo.

Such monstrosities and defectives occur in the human beings. This due to ill health of the mother, through worry or shock; chronic diseases of the kidneys and any disease that tends to lower the quality of the blood stream of the mother during the early period of gestation. Prevention of such, therefore, is by abstinence during a period of ill health. And as such may occur to anyone, abstinence during intoxication and ill health should be considered necessary.

Improvement of the race.

As to the improvement of the race. We should strive to work on the theory of construction instead of destruction; as advocated by some. Those who are defective should receive proper attention from time of birth. Defects should be corrected. No matter in what part of the body if possible.

Hair-lips, cleft-palate, adhesed-tongue, club-feet, bow-legs, curved spine or what not, should have early attention from the surgeon.

Every child should from time to time be examined by a competent physician as to its physical development.

The head, eyes, nose, mouth, teeth, throat, spine, arms, and legs; the whole body and its organs should be carefully inspected to learn whether or not there are physical defects—especially the teeth—faulty teeth mean faulty mastication, infection and disease. In this manner the child can be guided to normal development. Spinal curvatures should be looked for, and if found, corrected

as early as possible and so with other defects.

The infant, the child should be observed whether or not he or she is a mouth-breather. It is the mouth-breather that will develop adenoids, ear ache, tonsilitis, etc. See that he or she breathes through the nose—keep the nostrils open, then the child will breathe through his or her nose and prevent development of adenoids and other throat troubles.

Improvement of the race.

When should we begin the task of improving the physical condition of the human race?

This may be answered in different ways, and from several viewpoints; many of which we have already brought out.

But the most important are three: Early infancy, childhood, and the age of puberty.

In early infancy and childhood we prepare for the healthy or unhealthy child. When the little stomach of the babe is weakened, it is difficult to bring it back to normal health—this condition usually continues more or less through its life.

The next important period of life is puberty. In puberty you prepare the boy and the girl for the state of fatherhood and motherhood. Healthy parents usually beget healthy children. Hence, to be consistent, during infancy and childhood we must prepare for healthy boys and girls—healthy adults live to bring healthy offspring.

Physical and mental development.

Careful study has shown that children born of parents of mature mental and physical development are stronger and brighter than those born to parents of immature age.

We frequently see boys of eighteen or twenty and girls of sixteen years marry and beget children when they (the parents) had not reached maturity. Children

of such parentage will usually be under weight and lack in mental development. When we view nature, we see the same principle applies to animals.

Eugenics.

With the right sort of eugenics true scientists and physiologists are in perfect sympathy. There is a sound species of eugenics which ought to be welcomed by every lover of his kind. And, as it is desirable that the right kind of children should be born, it is deemed no less desirable that the right kind of men and women should wed.

Certain diseases or certain undesirable propensities are either transmitted by the parent to the child or are acquired from early domestic environment.

Persons possessing these defects must not be allowed to marry.

Chief among these diseases are alcoholism, lead poison, venereal diseases, epilepsy, insanity, feeble-mindedness, def-mutism and consumption.

We are not opposed either to eugenics in the abstract or to any right form of eugenics in the concrete. But we are opposed *to the spirit and the methods of the present movement* as embodied in the activities of many practical eugenists.

The greater number of eugenists are over hasty in the practical application of their principles. They unnecessarily infringe on the rights and sacrifice the good of the individual.

Seeing that the science of eugenics is still in so crude a state, what right have they to influence our legislatures to adopt the most drastic measures in behalf of a problematical improvement of the race?

The average politician who secures a seat in our legislative bodies is not a man who understands the significance of such enactments, affecting, as they do, personal, social, and religious interests of the most vital importance. What right have they to apply a half-

digested science of eugenics to the *immature minds of children*—especially when they are aware of the widespread opposition to the procedure on the score of morality and religion?

They unnecessarily infringe the rights and sacrifice the good of the individual. In all legislation, it is true, the good of the greater number claims the first consideration, but there are certain individual rights that must not be sacrificed by human law to any prospective good of the greater number.

Take, for instance, the right of the individual man or woman to enter the wedded state.

The breeding of children is not the only object of marriage. The devine institution of matrimony contemplates also the happiness of parents, and at the same time provides for the satisfaction of sexual instinct under the regulation of law.

An unruly satisfaction of the instinct will oftentimes be the result of a prohibition to marry.

And what right-minded eugenist can view with complacence the spread of incontinence among so large a number of the unmarried?

Be it said: That children of consumptive and other defectives often inherit the best of moral tendencies from their parents and are bred under parental care to habits of virtue, which certainly ought to be reckoned as assets for the community in which they live.

That such should be systematically instructed and directed—in the early physical rearing of their children and that the children should secure special hygienic and medical aid, is a proposition to which few would object. Besides, in consequence of the advance in medical science, many young men or women infected by organic diseases have been saved by medical care for many years of usefulness.

Vasectomy, or any other such operation is indeed

effective, but the prevention of parenthood will not bring a cure of incontinence.

Procreation will be impossible; but who does not see that the very absence of what is often regarded as an inconvenience of sexual indulgence will be an inducement to incontinence?

The instruction of groups of children in the secrets of nature is another instance of harm done under the inspiration of the eugenist movement. The professed object of such instruction is to instill into young minds a love of purity, to warn them of the dangers that threaten them and of the consequences of carnal indulgence.

It is presumed that when a child is taught the nature and purpose of certain bodily functions he will begin to take a serious view of matters, which he now regards lightly, and will develop a sense of self-responsibility.

Here again, it is not the aim but the method that we should condemn.

We are uncompromisingly opposed—as the great majority of mankind is opposed—to the teaching of any of these things to children in groups and even to the individual child in private, except with the utmost discretion.

One shows very little knowledge of child nature to suppose that a class of children hearing these things explained will not suffer moral taint—the very fact that these matters being spoken of in class denotes a boldness and diminishes self-respect.

Eugenists advocate extreme measures when moderate ones would suffice. They favor, for instance, the mutilation of the feeble-minded and others when such expedients as segregation have proven to be eminently successful.

And again. Eugenists often ignore the best of all

means of improving the race—those supplied by religion and the moral laws.

Eugenics would have smaller reason for existing if the spiritual and supernatural dominated in the souls of men, for many of our racial distempers are the fruit, directly or indirectly, of sin.

No true philosophy of health can afford to undervalue the spiritual element in man's nature. This being the case, any system of eugenics that fails to bring these truly eugenic influences into the foreground of the propaganda, will be notably defective.

CHAPTER XLIII.

Marriage and Venereal Diseases.

THE object of this chapter will clearly set forth the dangers of introducing venereal diseases into marriage—to the wife, to the offspring, and the dangers which come from their morbid irradiations into the family and social life—and to indicate the most effective means to prevent these dangers, or to limit and circumscribe their spread.

Preservation of the helpless.

This work has for its object the preservation of the helpless and the innocent from such infection; one of the highest ideals of prevention or preventive means. In safeguarding marriage from venereal disease—the physician becomes the protector of the wife and prospective mother and her offspring.

Be free from disease before entering wedlock.

Every father and mother as well as their marriageable sons and daughters should acquire at least a rudimentary knowledge of the dangers of these diseases, as well as how to avoid infection; and if infected, realize the importance of being fully cured before entering wedlock.

From the biological, medical and social points of view, the function of reproduction is the most important of all functions of the body. In order to assure the perpetuation of the species, nature has implanted in all animals the sexual organs, capacity and instinct, which incites to a relation between the sexes, involving reproduction.

Man the only creature subject to venereal disease.

But singularly and distinctly, man is the only animal who voluntarily limits his offspring, and who is subject to diseases distinctly inimical to the integrity of his reproductive function.

Venereal diseases are distinguished from other diseases by the altogether special conditions under which they are propagated. They are most commonly communicated through that relation between the sexes ordained by nature for the continuation of the race. Through the institution of marriage this relation is legalized by the state and sanctioned by the church and society as honorable and virtuous.

These diseases are further distinguished by the fact that they primarily and specially affect the organs of generation, often impairing or destroying the procreative capacity and thus defeating the supreme object for which marriage was instituted.

Motive of marriage aims to procreation.

No matter what may be the motives that actuate men and women in joining themselves in the state of matrimony, the social aim of marriage is the creation of the family; the rearing of children.

Warning to the infected.

The man reeking with immorality should no longer with "unabashed forehead" enter the sacred circle of virtuous women and consider himself unworthy to ask the hand of a pure young girl in matrimony.

As long as men may, without scruple, without violation of social laws, with what one might term the tacit encouragement of society, freely consort with immoral women, without incurring any social stigma, so long will they continue to infect innocent women, whom they marry, with diseases that soil them, poison them, and which kill them.

Worse than savages.

With all our civilization we are put to shame even by the savages. The savages know of no fastidiousness of the sexual instinct and of brothels. We are, indeed, likewise savages, but in quite a different sense. Proof of this is furnished especially by our youth; so many

of our students, and young men in general, passing through the school of corruption, and drag the filth of the road, which they have traversed before marriage, along with them throughout their life, due to improper training.

Keep the youth pure by a thorough systematic plain training. Not only in matters of secret vice, but also, teach them the natural responsibility towards their own body and those that may become their charges—their future wife and children.

And last, but not least, that men have no more right to impurity than women. If they expect to marry a pure woman, they should be pure themselves and remain so. There should be no double standard.

The youth must be taught that the boy, the young man, and the husband have no more right to an impure life than his sister, or the other fellow's sister. And that this sort of a man is the only one who has a moral right to marry a pure girl.

Rear pure boys, then the harlot will lose her vocation.

Elevate the morals of the boys, then you will have pure men and moral husbands.

CHAPTER XLIV.

Foundation of Our Social Organization.

Family, the unit of social organization.

THE family constitutes the foundation and fundamental unit of our social organization; whatever affects this unit injuriously reacts unfavorably upon the collective social family or body.

"The welfare of the family underlies the welfare of society," says Herbert Spencer.

Another feature of social interest is that the incidences of venereal disease fall most heavily upon the young, at or near the marriageable age; and thus those designed by nature to be the future fathers and mothers of the race, are entirely incapacitated for this duty, or rendered practically unproductive during what should be the most fruitful period of life. If, as stated by distinguished scientists, man is the most precious capital of the states and societies and "the life of each individual represents a certain value," no more important sociological problem can engage our attention than the relation with marriage, of diseases which specially affect those physiological functions through which life itself is perpetuated.

Syphilis — greatest destroyer of the race.

No disease has such a life destructive influence upon the offspring as syphilis. No disease has such a destructive influence upon the health and procreative function of woman as gonorrhea. And since the welfare of the human race is so largely bound up in the health and productive capacity of the wife and mother, the sanitation of the marriage relation becomes the most essential to social preservation. The pernicious effects of venereal diseases introduced into marriage are not to be measured alone by

the limitation of the offspring. The influence of inherited syphilis is manifest in the producton of various dystrophies, malformations, and lesions of important organs; it seriously compromises the physical development, mental vigor, and vital stamina of the descendants and constitutes a powerful factor in the degeneration of the race.

Marriage not only for procreation.

The social aim of marriage is not simply the production of children who are to continue the race, but of children born in conditions of vitality and physical health; it is to produce a race well formed and vigorous, not to procreate beings inferior and stamped with physical and mental inferiority, destined to early or to chronic existence of invalidism. The economic factor involved, the charge upon the community from sickness and inability of self-support consequent upon these diseases, and their influence upon the health and longevity are of general rather than special interest in this connection.

Gonorrhea cause of blindness.

A factor of considerable economic importance may be briefly referred to, is the charge upon the community resulting from the blindness caused by gonorrhea. It is well know that gonorrhea often destroys the most important organs of special sense, especially that resulting in blindness. It has been computed that from twenty to thirty per cent of blindness in this country is caused by gonorrhea or gonococcic infection.

The largest proportion of this blindness occurs as a result of purulent conjunctivitis in children infected at birth.

The amount of blindness occurring in adults from syphilis caused by atrophy (wasting away) of the optic nerve is by no means a trifling quanity. The socio-economic importance of this one factor, entailing a cost for the maintenance of the blind in this country of many million dollars per annum, is not to be overlooked.

Scientific statistics.

Social disease is the cause of two-thirds of the blindness of young children and of one-fourth of all blindness. And according to the report on "National Vitality," compiled by Professor Irving Fisher of Yale University and published by our government, the statement is made that gynecologists furnish statistical evidence showing that eighty per cent of the deaths due to inflammatory diseases peculiar to women and about seventy per cent of all the work done by specialists for disease of women is caused by this disease.

Quite apart from the sociological aspect of the question are the pernicious effects of venereal disease introduced into marriage upon the wife and future children appeals to that humanitarian instinct which prompts protection to the innocent and helpless; those who cannot help themselves—the wives and their offspring.

In marriage, relation renders the wife a helpless and unresisting victim. The condition of marriage is a chain which binds and fetters the woman completely making her the passive recipient of the germs of any sexual disease her husband may harbor.

Wife the helpless victim.

On her wedding night she may, and often does, receive unsuspectingly the poison of a disease which may seriously affect her health and kill her children, or, by extinguishing her capacity of conception, may sweep away all the most cherished hopes and aspirations of married life.

The victims are mostly young and virtuous women, the idolized daughters, the very flower of womankind. They are women endowed by nature with all those physical attributes of health and vigor which fit them to become the mothers of the race.

She is an "innocent victim" in every sense of the word, is incapable of foreseeing and powerless to prevent this injury. She often pays with her life for her blind confidence in the man who ignorantly or carelessly passes

over to her a disease he has received from a prostitute.

Does not respect station of man.

Venereal diseases respect no social position nor virtue, they ramify every class and rank of society. "Like pallida mors," they approach with equal step the habitations of the poor and the palace of the rich.

They constitute the connecting link which unites the virtuous wife and the debased harlot in the kinship of common disease. But, who are responsible for the introduction of venereal disease into marriage and the consequent wreckage of lives of the innocent wives and children?

Responsibility rests on ignorance.

As a rule, not the experienced libertines or the confirmed debauchee, but, for the most part, men who have presented a fair exterior of regular and correct living—often the men of good business and social position—not infrequently what are considered the "good catches" of society—the men who, indulging in what they regard as the harmless dissipation of "sowing their wild oats," have entrapped the gonococci or the germs of syphilis.

Physicians too easy.

These men believing themselves cured, it may be sometimes even with the sanction of the physician, marry innocent women and implant in them the seeds of disease destined to bear such fearful fruit. Unfortunately in many cases, it is the unfaithful husband and father who receives the poison from a prostitute in an extraconjugal adventure, carries it home and distributes it. *Then what are the results?*

If the germs of syphilis are conveyed to his wife, there is to be feared, in addition to the individual risks she is compelled to suffer, the destructive and blighting effect of the disease upon her children.

Blight upon children.

Syphilis is a poison by whose foul infection the proc-

ess of nutrition are so changed and vitiated that the product of conception may be aborted at an early period, or brought into the world before its time a macerated shape; instead of the rosy, healthy, well-formed child, there may survive a puny, frail being, feeble in body and mind, and an object of pity and horror, doomed, if not early death, to bear through life the stigma of degeneration and disease.

Gonorrhea worse than syphilis.

In case of gonorrheal infection, the individual risks the wife incurs are much more serious than those following syphilis. The infection may invade the cavity of the uterus and ascend through the tubes, causing salpingitis, ovaritis, peritonitis, etc., destroying her conceptional capacity and render her irrevocably sterile, to say nothing of the resulting dangers to life and frequent necessity of surgical operations to remove her tubes and ovaries. It is by no means intended to assert that every man who enters into marriage with an uncured gonorrhea or still active syphilis will invariably infect his wife, with the consequences as depicted.

It has been shown by observations that men have married with a syphilis in full activity of secondary manifestation and did not infect their wives, nor transmit the disease to their offspring.

Uncured gonorrhea infection.

Likewise a man with uncured gonorrhea may marry and his wife not be contaminated. But these are exceptional cases and cannot consistently enter into appreciation of the dangers introduced by venereal diseases into marriage. In estimating the degree and immensity of these dangers we must take facts of common and habitual occurrence rather than those which are exceptional to serve as basis of our prognostication.

Transplanting venereal diseases to the marriage bed does not rob it of its most distinctive character—con-

tagiousness. To the contrary, it finds there the conditions most favorable for infection.

Experience shows that when the husband is so diseased, the healthy partner seldom escapes contamination. To quote a witty saying, "Gonorrhea and Syphilis like the daily bread, are divided between husband and wife."

That in a sense is true, and alas, does not end with them, for, their family, their descendants may suffer for the sins of the parents. It is a deplorable condition that we must try to prevent.

With this object in view we write these articles. We hope to so enlighten parents that they will see the necessity of preparing their children that they may keep free from this horrible plague.

This is a subject that must be taken in account with the life and duty of husband wife, father and mother.

Affects offspring and nation.

As Christian and as citizen. This question not only affects the family but the nation.

CHAPTER XLV.

Marital Contamination Frequent.

Frequency of venereal disease.

THE frequency of venereal disease is full of significance and consequences, as a social peril; mostly brought about hrough their introduction into married life. This is verified by the frequency of conjugal contamination, and fatal results to their offspring.

This frequency does not admit of actual count as there are no data of statistical character which is available as a basis.

There are reports, however, which give us safe estimates; so the "Report of the Committee of Seven on the Prevention of Venereal Diseases in New York City," would indicate that about 30 per cent of all venereal infections occurring in women in private practice in that city are communicated by their husbands. The same may be said of venereal morbidity in general. Much of its prevalence escapes recognition and must always remain so, as they are an unknowable quanity. This is due largely to the "shameful character of the disease," and its difficult and baffling character as a sanitary problem.

Venereal disease greater than the estimates.

Enormity of venereal disease ignored by society.

Venereal diseases are entirely ignored by our sanitary bureaus in the registration of contagious diseases; notwithstanding that we know, that gonorrhea is the most widespread and universal of all diseases in the adult male population, being seventy-five per cent more. The prevalence of syphilis, by far not so universal, is variously estimated at from five to eighteen per cent. The venereal morbidity is higher in large cities than in rural communities, although this preponderance is not marked today as formerly, since the modern facilities of travel have tended to bring all communities

into intimate relationship. It is worthy of note that in certain rural communities in Russia seventy-five to eighty per cent of syphilis is due to infection in married life.

While we are incapable to determine the extent of gonorrheal infection in married life, all who have studied the subject agree that in reality it is much larger than is commonly suspected. One method of computation is that based upon circumstantial evidence, and may be presented as follows: A large proportion of men who marry have or have had gonorrhea. This infection occurs in the great majority of cases from the eighteenth to the twenty-fifth year, that is, before or about the marriageable age.

Disease insufficiently treated.

A large portion of these men are not sufficiently treated or definitely cured before entering marriage. Infection of the wife under such condition is most probable.

"Noegerath stated that of every thousand men married in New York, eight hundred have or have had gonorrhea, from which the majority of the wives have been infected."

As regards to the extent to which syphilis prevails in married life, the statistics of Fournier, embraces only those cases in which the origin of the infection were definitely traced, showing that twenty per cent of all women suffering from syphilis have been conjugally contaminated.

This it seems would be rather under than above the average, although if we consider the number of public women in large cities who have syphilis this ratio would give a considerable number of marital infections.

Observations by eminent clinicians, at the clinics and hospitals of large cities, extending over periods of several years indicate that fully seventy per cent of all women who came there for treatment were respectable married women who had been infected by their husbands.

CHAPTER XLVI.

Mortality of the Offspring.

Mortality among children.

THE mortality of the offspring from marital infection has a special interest in connection with the influence of venereal diseases as a factor of depopulation. It is claimed that syphilis is responsible for forty per cent of abortions and miscarriages, the remaining sixty per cent embracing all causes of whatever character, artificial or otherwise.

It is known that syphilis poisons the fountains of life. It destroys the product of conception or blights its normal growth and development, either by its devitalizing influence upon the germinal cells or by its action upon the processes of nutrition.

Gonorrhea most deadly.

Gonorrhea is more radical and deadly in its action. It renders the procreation or procreative process null and void by mechanical occlusion of the oviducts, thus blocking the channels of communication between the ovum and its fecundating elements, the spermatozoa. In other cases the culture field of the ovum is rendered sterile and unproductive by the inflammatory condition and vitiated secretions of the lining membrane of the womb. In many cases the mechanism of its production must be sought for in the anatomical changes caused in the oviducts. When these changes take place gonorrhea absolutely prevents what syphilis maims or destroys.

Gonorrhea cause of sterility.

The influence of gonorrhea is more manifest in the production of secondary sterility. A gonorrheal woman readily conceives as a rule, unless her tubes are occluded or diverted. The influence of syphilis upon the offspring is more marked in that it blights the normal growth and development of conception by its devitalizing effect or

action upon the process of nutrition and is manifest in numerous and various degenerate diseases resulting in premature death.

In this country, we have no carefully kept statistics bearing direct upon this subject that mathematically express the rate of hereditary syphilis. Almost every physician however, who has charge of venereal clinics and investigate the past history of syphilitic mothers knows that nothing is so murderous to the offspring as syphilis. This fact is so generally recognized that the history of a series of miscarriages always excites a suspicion of syphilis and is readily accepted as a diagnostic sign even when there are no active manifestations to justify the diagnosis.

Statistics of European observers, which have been collected from both, private and hospital practice, show in a most positive manner the injurious influence upon the offspring.

Mortality sixty to 100 per cent.

An analysis of these statistics taken irrespective of social conditions of parents, show that when both parents are infected the mortality is sixty-eight per cent. In private practice the mortality is given as sixty to sixty-one per cent. In public hospitals and more particularly those frequented by prostitutes, the mortality is as high as eighty-six to one hundred per cent. It is well known that the mortality of hereditary syphilis is influenced by social conditions, and whether one or both parents are infected.

The mortality of infants reaches its maximum in the first year of married life. Fournier's statistics show that ninety women infected by their husbands became pregnant in the first year of married life, fifty of these pregnancies terminated by abortion or expulsion of dead infants, thirty-eight which died soon after birth, and the birth of two which survived. These cases he observed were not in the hospitals, or in inferior social surround-

ings or under conditions of poor hygiene, or poor food, misery, debauchery, etc., but of his private practice, in the middle class and aristocratic families, in young wives, well formed and in good condition for the most part, enjoying all the advantages of fortune and favorable hygiene.

Syphilis in certain families extinguish posterity.

The same statistician, in a further series of statistics, all taken from the most authentic sources, where syphilis has practically extinguished the posterities of certain families.

In one table he quotes, out of 216 births, there were 183 deaths; another, out of 157 birth, 157 died, a mortality of 100 per cent.

And again, while gonorrhea is insusceptible of hereditary transmission, its influence as a depopulating factor is scarcely less pronounced than that of syphilis, due to its inhibitory influence upon procreation. Neisser contends that gonorrhoea is even a more potent factor in the depopulation of countries than syphilis.

He regards gonorrheal infection responsible for more than forty-five per cent of sterility in marriages. When we consider the vast number of childless couples in this country, we can form some idea of this one disease, as a cause of depopulation. The percentage of sterility in women due to gonorrheal infection, is variously estimated at from forty to eighty per cent due to endometritis, mesometritis, perimetritis, and salpingitis of gonorrhoeal origin.

Noeggerath in 81 gonorrhoeal women found forty-nine entirely sterile, and Kehrer found in eighty sterile marriages forty-five caused by inflammatory and other changes, all of gonorrhoeal origin. These changes relate to absolute sterility; as a matter of fact, we find that while gonorrhoea is often the cause of primary sterility, its more pronounced and various effect is in the production of secondary sterility.

CHAPTER XLVII.

The Social Misery.

Is cause of social misery.

IN ADDITION to the physical evils that flow from the introduction of venereal disease into married life, we may briefly refer to the social misery and unhappiness there is engendered through them.

Disunion of households, separation and divorce, are among the frequent, the deplorable consequences, especially when as it often happens, the woman learns the nature of her trouble. While she may not appreciate its pathological significance, she suffers most keenly from the knowledge that her husband has soiled her from an impure disease.

The revelation naturally causes sentiments of disgust, repulsion or resentment towards the man who has brought this indignity upon her, who has contaminated her with a disease which she regards as "dishonor's crown of dishonor," "the disease of the woman of the streets."

Separations and divorces on account of marital infection from venereal disease are by far more numerous than is commonly suspected. The cause of action in the applications for divorce usually appear under some less incriminating name, as cruelty, non-support, or other pretext, while the true cause is sedulously concealed. It is a "shame that cannot be named for shame."

Cause of marital unhappiness.

The sterilizing influence of venereal disease upon the procreative capacity is another fruitful source of marital unhappiness. If, as claimed by high authority, "premeditated childlessness is a crime against society," what should be said of enforced childlessness through sterility

not of choice, but of compulsion, of the sad fate of women balked of their desire to have children, through disease communicated by their husbands?

It is only in the consulting room of the physician that one learns of the intense insistent craving on the part of many women for children, and of the wretchedness and disappointment they suffer in being condemned to pass their existence in a childless wedlock.

The instinct of maternity is by nature implanted in every normally constituted woman, and she realizes that in missing her highest destiny in being created a woman; but, when it comes to the procreation of syphilitic children, sterility seems a blessing rather than a misfortune.

Fournier gives the following as an example:

Syphilis cause of abortions.

"One of my patients who had already had three miscarriages, of the cause of which she remained ignorant, brought into the world a syphilitic child which soon died, but whose disease was a revelation for her. 'Never,' she said to me one day in her chagrin, 'will I pardon my husband for the four children I have lost through his fault.' Some time later, when she had certain specific accidents, I endeavored to have her take treatment which was repugnant to her, insisting upon the utility of this treatment for the children she still might have. She responded with the greatest indignation, 'what affront you put upon me, doctor! How can you believe that I am destined to again have children of a man who has killed four? This man is and will be nothing to me. Do me the honor, if you please, to consider me a widow.' That was ten years ago, and she has kept her word."

Live separate to avoid religious and social scruples.

It is not infrequent that from religious scruples against divorce, the desire to save appearances before the world, or the shrinking from notoriety, the husband and wife live divided lives while continuing to dwell under the same roof.

It is not to be assumed that such husbands have no share in this marital misery; on the contrary, they may be overcome with remorse upon seeing the sins of their youth visited upon their innocent wives and children. Even when they have not communicated their disease, they live in constant apprehension lest they should do so; an awakened conscience is a terrible foe to happiness.

Haunted by fear that offspring be affected.

Men who marry long after the time in which syphilis is considered contagious and transmissible may be tortured with the haunting fear that their children may show some taint of their old disease. It is well known that some syphilitics pass the months of their wives' pregnancy in perfect agony of apprehension for fear that the child might be syphilitic. It is not exaggerating to state that every year thousands of men in this country, carry to the marriage bed the germs of diseases destined to wreck the health and lives of their wives and children. "Oh, what men do, what men dare to do, what men daily do, not knowing what they do." It is the last clause of this proposition whic hexplains this hecatomb of victims, and at the same time suggests the saving hope of the situation. It is not because men are so lacking in conscience or sensibility that they perpetrate these crimes against the women they have vowed to love, cherish and protect. It is largely due to ignorance, from false and erroneous ideas of the dangerous nature and far-reaching consequences of their disease; and for which the medical profession is in some degree responsible. The views of the laity upon medical matters are often but reflected opinions from the medical profession imperfect, distorted, or exaggerated.

CHAPTER XLVIII.

The Attitude of Society.

State cares for wife's property, but not her health.

THE institution of marriage with the view of regulating the sexual relations between man and woman, has thrown no protection around it against the communication of disease through the relation thus established.

The state takes care of and protects the wife in her property and connubial rights, and the material interests of the children; it makes certain conditions as to age of the contracting parties, parental approval, the securing of license, etc., but imposes no restriction upon the individual liberty which permits a husband to poison his wife and children with venereal diseases.

"No! society by its peculiar and false attitude towards these diseases, shutting its eyes to their danger, and its edict of silence imposed upon the teachers of youth, public education and educators, and even parents, as to the existence, even, of these diseases, foster that ignorance which is the chief cause of the evils we are considering.

If young men would be educated in matters relating to sexual hygiene, the significance and dangers of venereal diseases, their modes of contagion, and serious consequences they involve in married life, would be of inestimable service in protecting the sanctuary of marriage from their invasion. Public sentiment, however, based upon traditional usage persists in regarding this class of diseases as "shameful and immoral origin," and sets its seal of disapproval upon the dissemination of knowledge respecting their dangers. This culpable policy is like a boomerang, which returns to

Public disregard necessity of teaching young men.

smite society through the very institution it has created for its own perpetuation.

The state enjoins fidelity to the marriage vow, and the law may intervene by dissolving a union which has proven so disastrous, but only at the expense of publicity. If the true cause of action is stated it exposes the woman to public branding her with a shameful disease, if there is a child, perhaps, the public certificate counts for it as well as the personal degradation of a vile disease.

At best it is a poor recompense the law offers; the evil once done is irremediable.

No wonder, then, that the woman shrinks from having herself proclaimed as the bearer of a degrading disease. This infamy shocks her self-respect, her modesty, and the purest and strongest instincts of womanhood.

Parents duty to neighbors' boys.

Parents should consider that one of their duties is to do all they can that their neighbors' boys are religiously and sexually pure. Such may become your son-in-law or the son-in-law of some of your friends.

That makes this your business if nothing else does.

We may learn of Psychology,
Mysterious Phrenology,
And include Sociology.
But not speak of Sexology,
Or attendant Physiology;
Of what we should neither think nor know—
But treat them as Mythology.

CHAPTER XLIX.

Prevention of Social Disease.

Prevention is greatest importance.

FROM this study of the relation of venereal diseases with marriages, it is evident that these diseases, from their nature and mode of propagation, are mingled with the sources of life; they affect the dearest interests and most sacred relations of human society, and their prevention is of the greatest social importance.

The health of the family, its productive power, and vitality of the race, are involved in the conservation of the integrity of the functions which these diseases damage or destroy. In the face of these dangers—moral, physical, and social, which emanate from the introduction of venereal diseases, society remain passive and almost indifferent.

Social indifference much to blame.

Through its instrument the laws of the state affords the doubtful remedy of separation or divorce, to the injured wife, but it does not protect her from this injury. The essential condition of the law's intervention is, that the injury shall have already occured. This obdurate indifference may be traced in part to the peculiarity of human nature which accepts evils of common and everyday occurrences as inevitable and among the established order of things. And, again, certain elements of society regards the communication of disease in marriage as a matter between husband and wife with which society has nothing to do. The chief cause of this indifference is ignorance of the significance of these dangers and the extent to which they prevail, their limitation not being confined.

The chief cause is ignorance.

While it is the husband and father who conveys the

infection to his family, and is the cause of the injury and unhappiness of the lives of his wife and children, yet all these innocent infections are to be treated or traced back to their source of illegal sexual commerce known as prostitution. Consequently the prevention of venereal disease in marriage cannot be considered apart and distinct from the prevention of venereal disease in general.

Peril to family only a part of social damage.

The peril to the family is but part of that vast venereal peril which so seriously affects the public health, and which with the inordinate use of alcohol, and tuberculosis, constitute the three great modern plagues that afflict humanity.

Endeavoring to circumscribe and limit the spread of these diseases after they have been introduced into marriage, neither to prevent their introduction by postponing marriage until the disease is cured, nor to intervene by measure of prohibition at the last moment when all arrangements for the marriage have been completed are the best preventative measures. What is required is strict prevention, and the most efficient preventive is to prevent the contraction of the disease which renders a man unfit for marriage.

It is only by attacking the evil at its source that its baneful effects upon the individual, the family, and society can be prevented. The prevention of venereal diseases and the prevention of prostitution are indissolubly linked.

Cannot dissociate cause from the effect.

We cannot dissociate the effect from the cause. It is not in the province of this study to undertake the solution of the difficult problem of the social evil, but certain phases of this problem, and the measures to be employed for the protection of the marriage relation from the diseases engendered by prostitution, may be considered with profit to society.

In the first place, it can be positively affirmed that

this is not purely a medical question. "It is bound up with all the vast and complex interests of our social life;" it involves legal and moral as well as pathological questions.

The social evil has always been regarded as a corruptive force in society. It has a dual, or, rather, a triple aspect.

It is, in some of its manifestations at least, a violation of the law; it is an offense against morality, and a prolific source of disease. The measures, then, to combat the evil are: administrative, by the state; sanitary, by the medical profession; moral, by the clergy and religious teachers; and last, but not least, the parents and guardians.

Pity the woman who was infected by her spouse;
Pity the children born to and by such infected parents.

A Father's Object Lesson.

IT IS the bounden duty of fathers to teach sons how to avoid these diseases.

While writing the above chapter a man on the shady side of life, but vigorous and of good health in the course of conversation said: "I always had a feeling of fear as to becoming infected with such diseases, and that fear came about in this way. My father was a man of good moral character and took great pains in the training and education of his family. There were three boys; all entering into puberty and manhood. Possibly my father heard us talking together on subjects that hitherto had not been touched upon. However, he broke in upon us by saying, 'boys, you know I try to teach you something every day, and I am pleased to observe you profit by such teaching; but I have noticed that object lessons are the most impressive. Now, today, I am going to give you one that I think you will remember as long as you live.

Object lessons most impressive.

Come, we will have a walk.' We always enjoyed a walk with him, we were as companions, although he was our father—a good kindly man respected by all. Well, to make a long story as short as possible, he introduced us to a young man whose cheek on the right side was a mass of sores and part of his lip eaten away. We went to another gentleman's house; plenty of servants—male and female; the master of the house saw us and entertained us. When we left his table he had to be assisted by a man kept to wait on him; he was diseased so that he could not walk.

"He next showed us a man covered with sores on every part of his body the eye could see, and he also was blind in one eye. All these men were well off, retired mrchants' sons, but all diseased and miserable with no prospect of recovery.

"On reaching home he proceeded to tell us how three youths with more money than brains had together visited a Brothel; and each of them came out diseased for which there was no hope of a cure, and to look forward only to suffering and someday be relieved by death." "I have had temptations" said the narrator and have resisted them. Yes, strong temptations they were, that brought to my vision at the moment, the object lesson of my father. And this is how I am still able to say: I have known only one woman—my wife. I was good through fear. Would that all were."

CHAPTER L.

State Measures.

Drastic measures by the state a failure.

IN PRIMITIVE times efforts were made to crush out the evil by force. Largely under ecclesiastical influence, and most severe and drastic measures were carried out—almost every conceivable punishment, flogging, branding, shaving the head, banishment and even death, were employed in vain. The experience of centuries has shown that prostitution cannot be crushed out by force.

Recognizing the failure of these brutal measures, the state has in modern times attempted to control and regulate a force for an evil which it could not suppress: the modern system of the sanitary feature becomes an essential element.

Morality and religion.

Morality without religion means morality without a base of moral obligation. Apart from religion we find no answer to the questions: *Why must I do this? Or, why must I avoid that?* If we discard the idea of a God by whom we were created, and to whom we owe obedience, there is nothing that can strictly oblige us to be honest if we are inclined to be dishonest. Honesty becomes a matter of expediency, and where we find it expedient to be dishonest, we will not be honest.

There is no obligation where there is no authority; but there is no authority that is not either in God or derived from God. The one who made us is the only one who has absolute and unqualified authority over our wills.

The obligations imposed by others—by one's parents,

by the State—are valid only in so far as they rest on the authority of God.

To sever morality from religion is to deprive morality of all motive and all sanction. There are a certain number of acts, such as the observance of the laws and the paying of one's debts—which are generally recognized as necessary for the welfare of society; but for the general performance of such acts what motive will be effective? The good of society as a motive of conduct may influence the select few, but it will operate very feebly among the masses. The selfish instinct, reinforced by greed or ambition, will surely overpower so shadowy a motive as the good of society or progress of humanity.

Perhaps a love of order will furnish the needed stimulus to civic virtue. No; for here again, the select few will be the model citizen, while the great multitude of uninspired will verge toward moral anarchy.

The one bond of society is conscience. And when conscience disappears it will be followed by anarchy.

But conscience is the voice of God heard in the heart, and to hearken to God's voice is, at least implicitly, an act of religion.

A society that is gradually drifting away from religion may foolishly base its hopes of permanent existence on its present condition, in which, bad as it is, there is a public recognition of the moral law; but let us not forget that it owes its present recognition of moral law, in the first place, to the actual influence of religion, which still has many loyal followers, and, in the second place, to that tradition of morality which is embodied in laws and usages inherited from a religious past.

Remember: State laws will not make men moral, nor women good.

CHAPTER LI.

Educational Measures and Fear of Consequences.

Large proportions of infection among the young due to ignorance.

IT HAS long been recognized by physicians, who are competent authorities in this matter, that a large proportion of venereal infections, especially among the young, occur from ignorance of the dangers of illegal sexual intercourse.

It is, also, recognized that the diffusion of knowledge among the public, especially the young, as to the dangers resulting from promiscuous sexual intercourse, the modes of communication of venereal diseases, direct and indirect, constitutes a most efficient means of prevention.

The indifference and stupidity of society to the dangers which menace the public health from the dissemination of venereal diseases, especially the danger which results from the introduction of these diseases, into marriage, is largely the result of ignorance—ignorance of their frightful consequences, their nature and modes of communication, and the number of their victims. Largely on account of the shame attached to venereal disease in popular estimation, the general public has not been educated into a knowledge of their danger, their modes of contagion, and the duration of their contagious activity. As a result this prevailing prejudice, the channels of communication which serve as a means of education and enlightenment of the masses are effectively closed.

Silence, a conspiracy for evil.

There is what may be termed "a conspiracy of silence," on the part of the public press, the clergy, and the public education and educators in relation to these diseases. It would be considered an offense against good taste to even mention the name or venereal diseases in the public

press. Even the least scrupulous of newspapers which does not hesitate to lay bare the disgusting details of domestic intrigues and social shames, a knowledge of which serves no useful purpose, but only panders to prurient and depraved tastes of its readers, most rigorously excludes all mention of venereal disease.

To a certain degree such reticence is commendable and in the interests of good taste and manners.

Daily papers not to discuss venereal disease.

It is not contented that these diseases should form the subject of discussion in the daily newspaper or of conversation in the family or in society. The fastidiousness of the public press is cited only as an illustration of that topic. The inconsistency of it all is that the public press does not hesitate to speak of prostitution, of adultry, of intrigues which convey to their readers a distinct conception of an immoral act, but they shrink from mentioning a common pathological consequence of that act as something unspeakably shameful.

This discrimination cannot be defended on the ground of "high moral tone;" prostitution is not tabood, although it is always immoral, while its diseases affect thousands of virtuous members of society who are in no wise responsibile for contracting them.

Parental silence is at fault.

The attitude of parents and public educators is in the same line of silence and secrecy. A knowledge of hygiene of the reproductive function and of the diseases which menace it from its irregular exercise forms no part of the education of the young.

As a result, the young man goes into the world, the subject of innocent sexual impulses, of which he has been taught nothing, without a word of admonition as to the necessity of self-control, or warning as to the dangers of the wrong exercise of his sexual function. He finds women who are at his disposal for the gratification of his desires.

First lessons are most impressive.

The first lessons he learns are from his associates, and those are, that social conventions place no restrictions upon the free exercise of his virile endowments; and stimulated by those most potent of all influences the example of his fellows he does not hesitate to plunge into the enticing pool of dissipation without dreaming of the dangers which lurk in its foulness.

Another cause of indifference of society is the survival of the old conception of the immoral cause of venereal disease. At the present time venereal diseases are the only ones that are so regarded.

Many excellent people still look upon these diseases as a merited punishment—a divine chastisement for sins of unchastity.

Venereal disease a divine punishment.

When considered from the statistics, and the scientific point of view, is this not borne out?

In the general conception, venereal diseases are diseases of debauchery—confined to an obnoxious class or their consorts, which carry with them the stigma of licentious living. They are without the pale of public sympathy and protection, because they are considered the result of immoral relations which are voluntarily entered into.

The public does not know that these diseases are often conveyed in the sacredness and what should be the safeguard of the marriage relation; that they embrace among the victims a vast number of virtuous wives and innocent children.

Greatest sufferers not the greatest offenders.

That the chief sufferers are by no means the greatest offenders against morality. Venereal disease, under these conditions, fall upon the just and unjust alike; it shows no distinction between the guilty and the innocent.

It may seem that we cannot impute to divine agency a disease which, say, syphilis, ruthelessly smites the inno-

cent wife and her offspring; and some may not consider a disease like gonorrhea as merited punishment when conveyed under the relations that society has sanctioned as lawful, honorable, and virtuous. A disease which ruins health, extinguishes conceptional capacity, and condemns the victims to a life of invalidism or to mutilation at the hands of the surgeon to save her life. But, after all it must be so—for, the human—the creature endowed with understanding, a free will, and capacity to control himself, is the only creature that is punished for misusing his sexual functions.

The human, the only creature punished.

The public does not appreciate the fact that the immense majority of the victims of venereal disease are the young, the inexperienced, and the irresponsible through ignorance. It may be said that society is under no obligation to protect those who voluntarily expose themselves to contagion, but, can it be said of the young who have been brought up in entire ignorance of such matters, that they voluntarily expose themselves to dangers which they do not even know exist? Are not the parents and society to blame for this faulty training, or, rather, absolute lack of training?

The public are the natural victims.

The attitude of society is not only one of apathy and indifference, but it sedulously endeavors to cover up and conceal the existence even of these diseases. Society frowns on all efforts of its enlightenment; it resolutely shuts its eyes to the dangers that threaten the social body from the venereal plague. Evil conditions, like crimes, flourish in the dark. In this atmosphere of ignorance, in disguise and darkness, wearing the protective mantle of secrecy, shame and silence; with absolute exemption from sanitary recognition or control, these diseases, unseen and unnoticed are given the right of way and free infection.

Parents and society to blame.

We should break away from false modesty.

In view of the dangers which menace the public, the family and the society from these diseases should break away. It is high time to break down these barriers of concealment and silence, behind which they propagate, flourish, and dissipate the dense ignorance of the public, by turning on the purifying light of knowledge, to do away with the mystery and secrecy which surrounds them, and put aside that ridiculous prudery which regards all knowledge of sexual matter as profane.

Young men should be instructed, should know the danger.

Young men should be educated in knowledge of sexual hygiene; they should be instructed as to the dangers incident to the wrong use of the reproductive function; they should be warned of the pitfalls and dangers which beset the pathway of dissipation; they should be instrumental in the knowledge that venereal diseases are the almost invariable concomitant of licentious living.

Candidates for Marriage.

Candidates for marriage should know.

CANDIDATES for marriage should know the terrible consequence that follow, when they marry with an uncured venereal disease, so that the pleas which the guilty party so often offers in apology, "I did not know," "I thought I was cured," or, "I had no idea that there was any danger of infecting her," should no longer be heard. "The plea of ignorance," as Cushing said, "Should no longer be available to shield those who bring disease and death in their families, who ruin the lives of those they have sworn to cherish and protect.

Fathers and mothers of marriageable daughters should know that dissolute men often make dangerous husbands; that the man who has been licentious in his habits before marriage is more likely to bring suffering than happiness to their daughter, and that the habits and sexual health of their prospective son-in-law are quite

as important to consider as his financial and social position. They should know that a man who has led an unclean life, is not a safe husband for their daughter; that sexual infection, which is a common consequence of such a life, is a fruitful cause of feminine infirmities and diseases peculiar to women, which so frequently result in dangerous diseases and ultimate loss of their productive organs. It may be questioned whether or not the exposure of existing evils should form a necessary part of the education of young women; but they should know something of matters which so closely touch their future health, domestic happiness, and probable future of their children. Ignorance is neither the best preservative of the innocence of young women, nor the best aid in the choice of the man whom she is to receive as her husband and potential father of her children. She should know that men who dissipate do not make desirable husbands.

Unclean men are not safe.

Young women should know that men who dissipate seldom make good husbands.

This enlightenment should extend to the masses. The public should recognize what the medical profession has long known—that venereal diseases are a social plague which threatens not only the public health but the welfare of the family and the race.

The perception of the public should be vivified as to the extent and significance of this danger, so that a healthy public opinion may be formed which will sanction all proper means towards their prevention by correcting the social condition from which they spring and, if need be, sanction legal punishment for their transmission.

Parents—Do not forget to tell your sons that sexual intercourse is not a necessity for good health of a man. Only an ignoramus or a charlatan uses that for his weakness, if not because of his meanness. To satisfy his sensual inclination is the usual justification—not natural experience, nor good reasoning.

CHAPTER LII.

Education in Hygiene.

Moral and hygienic education needed for the rising generation.

THIS education should be directed to the young. In the opinion of the writer, the most efficient means of checking the causes of the social evil lie in the moral and hygienic education of the rising generation.

Let us inquire what the character and scope of this instruction should be, through what agencies and methods should this instruction be given?

In the first place, if this instruction is to be effective against the dangers of this evil, it should be timely. It should be given before the danger of exposure is likely to take place. As previously stated, venereal diseases fall most heavily upon the young. The age of infection of young girls, who become prostitutes, according to Pileur, is from sixteen to eighteen years. The majority of which are infected in their minority. And according to Fournier's statistics, twelve per cent of the infection in men occur before the nineteenth year of their age, that is, the age in which they are still pursuing their scholastic studies.

Most infections occur before the age of twenty-five.

More than seventy per cent occur from the twentieth to the twenty-fifth year, which is, before the age of maturity and reflection. There is no reason to believe that the precocity of vice is more marked in France than in other countries. Numerous statistics might be quoted showing the precociousness of juvenile vice in our own large cities.

The age at which this instruction should be given, ordinarily should be at adolescence or early manhood but may be necessary at a much earlier period of life, as shown elsewhere in this book.

It should form a conservative part of the education of young men in high school and colleges, for it is at this epoch that the maximum chances of contagion are to be feared.

Full instruction not necessary.

It is neither necessary nor desirable that young men should be fully instructed in the anatomy and functions of the sexual organs. The object should be to give them simply and briefly a clear idea as to the hygiene of the sexual organs, the diseases to which they are liable, the habitual sources of these diseases, and the serious consequences to health that may follow.

The general character of the diseases, their modes of communication, direct and indirect, their effects, local and constitutional, and their ultimate result upon the health of the individual and upon the offspring should be described in plain easy terms. With the view to correct the dangerous idea that is almost universally believed, that Gonorrhea is a trivial disease of little or no more significance than a cold in the head or a catarrh of any other mucus surface; especial emphasis should be laid upon the serious consequences that may result from this infection and its after apparent cure.

Young men should be taught that the dangers attendant upon unlawful sexual intercourse arise from the fact that practically all prostitutes are diseased; further, that the younger, the more attractive they appear; that the loose women of the streets, the wine-rooms, theatres, and public halls are the most dangerous. They should know that venereal diseases are not in every case due to a life of debauchery, nor to a long series of exposures, but may come from a single exposure—from the first and only time.

The loose women of the streets, the most dangerous.

Sexual indulgence not necessary.

A principal feature of this instruction should include a correction of the common idea, too frequently instilled in

the minds of young men that sexual indulgence is essential to health, and that chastity is incompatible with full vigor. Too often do we hear it said—that this opinion is based upon the authority of the medical profession.

To the contrary, the opinion of medical men entitled to respect is that continency in youth conduces to strength of mind and body, and that illicit indulgence is not a safe substitute for marriage. They should be taught that the sexual passion must be restricted and controlled.

Alcohol a powerful element.

This warning would be incomplete without a reference to the influence of alcohol as one of the most powerful auxiliaries of sexual contamination. The element of alcohol in the propagation of venereal diseases has not been sufficiently appreciated, and that measures against the excessive use of alcoholic drinks in social circles will be an important means against the spread of venereal disease; this has not received the attention it deserves up to the present. Not prevention but control makes strong men.

First fall due to drink.

Many men who come under the observation of the profession ascribe their contamination to exposure while under the influence of alcoholic drink—"I drank too much and lost my senses," is a common excuse. Next to loose habits—perhaps more than any other agency, a large proportion of men, and still larger proportion of women owe their initial debauch to the influence of alcoholic drinks. Alcohol relaxes the morals, while it stimulates the sexual impulse.

Public education is supplementary to the parental at best.

The education to be given to young men in the school and colleges, which at best can be but supplementary, requires experience, forethought, and organization for its effective working; but the enlightenment by the parents, or kindly physician can be effected without delay.

The family physician is peculiarly fitted, not only by his professional knowledge, but also through his close and personal relations with his patients, to impart this instruction.

The physician to help the parents.

Every physician should be a missionary in his own field.

While the duty of reforming the morals of the community is not within the province of the physician, preventative measures, and individual reformation may be accomplished through his agency of instruction in matters relating to sexual hygiene and diseases of sexual life; in his individual capacity he can impart needed instruction to the young man of his clientele, to his patients in the hospital, and in his dispensary service. The intimate and confidential relations existing permit a great latitude in regard to all subjects relating to disease; the freedom from which his vocation permits him to talk on topics ordinarily forbidden, allows him to discuss without encroaching upon the reservation of propriety and good taste. He can speak with tact, but with sufficient plainness to be understood upon all questions relating to sexual morality, sexual life, and diseases, without offending sensibilities of the most modest woman; prudery of course cannot be considered in matters of this nature; and should be disregarded. However, these instructions should be addressed chiefly to the young men of his clientele.

Parents to watch over small children.

Parents, the clergy and public educators, can each in their own sphere and their own way contribute to this needed work of instruction.

Naturally it is expected that at least the beginning of such guiding and instruction would come from parental source.

Much depends upon the father, and the confidential relations existing between him and his son. As a rule, parents pay too little attention to the moral education of

their sons, and they too generally do not endeavor to protect them for contact with demoralizing influence.

Daughters are carefully guarded, their associates chosen, and a certain supervision exercised with a view of preventing contact with vice in any of its forms. Thousands of women fall because of the absence of such safeguards. Chastity does not altogether reside in the organization of the woman, but rather in her environment and social surroundings.

The son as well as the daughter should be guarded by parents.

Many young men complain bitterly, that they have never been instructed, that they were thrown into the world in entire ignorance of sexual matters. "If my father had given me ten minutes of sound advice and warning, I should have been saved years of sickness."

As a rule, such men know nothing; it is a matter of guessing, until they learn by bitter experience.

Proper instruction will constitute a valuable safeguard against venereal exposure. Fournier says: "Many young men thus instructed will expose themselves, but they will expose themselves less often, less readily, less recklessly, less foolishly, and thus a great number of contaminations will be prevented."

Experience teaches, that good counsels do not always constitute great efficiency against the promptings of imperious instinct; the teachings of reason are often powerless against the impulses of passion. But because we cannot extirpate an evil, there is no reason that we should not endeavor to limit and circumscribe it as much as possible. We might as well contend, that because we cannot destroy the cause of infectious diseases, we should cease our efforts to combat their spread.

"The master key to the door of hope,
May be held by you, by me;
But pray, what use is this master key—
If withheld by you or me?"

CHAPTER LIII.

Moral Education.

Moral education of highest importance.

THE hygienic education should be reinforced by moral education. There can be no question that moral means are of the highest importance; they strike at the root of the evil. It is but the truth to state that the most valuable and only radical means of prevention of venereal diseases, is in the correction of immorality.

Next to that of the parents in their home it is the province of the clergy and religious teachers to educate the public conscience, to inform public sentiment in all matters, which relate to morals. All teaching which inculcates self-control, personal purity, reverence for women, and respect for the dignity and sacredness of marriage are conducive to the object here in view.

Self-control, one of cardinal factors.

There is no question that the education of young men, with special reference to the promotion of masculine chastity and their preservation from the peculiar dangers which beset their path in life has not received adequate attention from neither the parents, nor from the religious teachers.

Apathy of the clergy due to false modesty.

And the cause of this apathy may be placed to the fact that such instruction cannot be well conveyed without reference to the character and nature of the habitual source of these dangers. With notable exceptions, the clergy may be justly criticized for their indisposition to touch the social evil. This is a fastidiousness not derived from the teaching nor from the example of the founder of Christianity; they shrink from all contact with this social leprosy. "This foul horror or ulcer in society, is a mysterious horror of nastiness which they do not at-

tempt to bind up and cure but pass on the other side." Sexual sins, lust of the flesh, fornication, etc., seem to have been singled out for special condemnation by the apostolic teachers, but at the present time how seldom do the clergy in the pulpit, or in the private exhortation, inveigh against the vice of immorality.

While there is no good reason to object to the theory of merited punishment for the sins of immorality; this view should not be pushed to its limited conclusion; that would disprove the treatment of cases of venereal diseases, as calculated to defeat the merited punishment.

Do not let them rot—be logical.

"Let them rot in their vice," is a too common expression. Not referring to the inhumanity — immoral relations often infect legitimate unions, and the punishment falls most heavily upon the innocent.

Until recently there has always been an irreconcilable conflict between the moralist and hygienist.

This vice disastrous to society.

The moralists look upon vice as far more disastrous to society and the individual than its resulting physical maladies; which is a moral evil and should be combated by moral means alone.

The hygienists look upon the effects of vice, the diseases that it engenders, their menace to the public health, their morbid irradiation into the family and social life, their pernicious effects upon the descendants and the race as the greater evil.

Opposition on these questions should no longer exist.

That which is termed fundamental opposition between moral and sanitary control, or rather, the opposition between the moral and physical or physiological control should no longer exist. It is not a question as to which is the greater evil, vice, or its diseases, nor which should be the exclusively appropriate remedy. The fact is both remedies must work hand in hand—they should prove the necessity of this work by each other.

Instead of working independently and often antagonistically, there should be co-operation and concrete action.

Many medical men are disposed to consider the social evil solely in the light of a sanitary problem and treat it as such, entirely ignoring the moral question involved, on the ground that hygiene has nothing to do with the regulation of morals; that its object is to preserve health.

But it should be considered that the object of hygiene is not simply to limit the diseases which affect populations; its highest function is to develop all those conditions which conduce to public health, which in its highest expression is inseparable from public morality.

Licentious living injurious to health.

Licentious living is not only an injury to the moral character; it is also an injury to the body, involving as it does the physiological functions which are almost inseparable from the contraction of disease.

The hygiene of the sexual functions come within the province of the physician as much as the hygiene of the stomach, the nervous system, or of any other organs of the body.

Moral education therefore, should be supplemented by hygienic education, and in so far as immediate results are concerned, in many cases, the latter is likely to prove more effective than the former.

Appeal to build up physical health may prove of more avail.

The warning of the moralist may be, "Keep the temple of your body pure; flee from fornication, because the divine law forbids it." The hygienist says, "Consort not with public women, because such commerce is not safe or wholesome for you, because disease is almost invariable consequence of such indulgence, and this disease may compromise or destroy your health or life." Practically it will be found that an appeal based upon the ground of care and upbuilding of the physical health often proves of more avail than moral prohibition.

Whatever may be said of the practical unwisdom of mixing medicine and morals, it cannot be denied that in the causation of sexual vice, the two factors, the one a physical and the other an immoral impulse, are intimately involved. The act is prompted by a physiological impulse and takes place under conditions which are classed as immoral, and has almost invariably as a pathological concomitant or accessory, disease; and is distinctly within the province of hygiene to teach control of sexual function and warn against its exercise under conditions which cause venereal disease.

And it is no less the province of the moralist to condemn a vice which has a demoralizing effect upon the individual and society.

Coming back to the more special object of this study, it may be asked, will this hygienic and moral training be sufficient to prevent the evil we have been considering—the introduction of venereal disease into marriage?

Experience of physicians who had much to do with this class of cases shows that there are conscienceless men who carry out their matrimonial projects after they have been fully advised as to the risks they convey to their wives, and despite the protests of the physicians.

While this is only too true, it cannot be gainsaid, that many more men would heed the warning if they had been instructed; and it is for the sake of these that our efforts are justified.

"Men who are occupied in the restoration of health to other men, by the joint exertion of skill and humanity, are above all the great of the earth.

"They even partake of the divinity, since to preserve and renew is almost as noble as to create."—Voltaire.

CHAPTER LIV.

The Administrative Measures.

The state can do much to check vice.

THROUGH its coercive force the state can do much to suppress the open manifestations of vice. It can check many of the affluents of vice. It can establish more stringent legal consent. It can, by contributing to the better housing of the poor prevent promiscuous occupation of young men and young women, in factories and workshops, and by establishing reform and restoration of housable life of fallen women, accomplish much toward correcting conditions which lead to prostitution. But the law has its limitation.

The state cannot legislate morals into a community.

Much of the prostitution is scattered and private, and cannot be reached.

The state cannot legislate morals into a community or nation.

The police force cannot make men moral nor women good.

In so far as the spread of venereal disease is concerned, the state can render most effective aid by suppressing charlatanism, which scatters its deceptive literature broadcast—claiming that a disease which is essentially chronic can be cured with a few bottles or boxes of "blood purifier," or a few injections of so-called serum.

It not only holds out delusive promises of cure, but gives a sense of false security, when the disease is still infectious.

The state may demand medical certificates of health.

Furthermore, the state imposes as a condition for its license to marry regulations relative to age and degree of consanguinity of the contracting parties;

so also the state may demand as a preliminary condition to granting a license a medical certificate that both parties are free from venereal disease. And it may impose a civil and penal responsibility for the transmission of venereal disease in marriage.

Medical Certificates—Difficulty in Securing Competent Officials.

MANY sociologists as well as physicians have urged that marriage license be issued only upon presenting a medical certificate showing that the contracting parties are free from venereal disease.

It seems plain that such certificates, if demanded by law, could only be issued by official physicians of boards of examiners appointed for that purpose. The official representative should not only be *competent and impartial,* but their services should be available when required.

Medical examiners and examination cumbersome.

In a state embracing many counties, it would be necessary to have many such officials, at least one for each county seat.

It would be difficult, if not impossible to find competent physicians, conveniently distributed, to act in such a capacity.

Hence, the purpose of such a law would be defeated by the practical difficulties encountered in certain cases to determinate the presence of infectious elements.

For example, the existence of acute gonorrhea, might be detected at the first examination, but in a case of chronic or latent gonorrhea it would require numerous examinations, and prolonged observation to authorize the issuance of a certificate that the infectious elements had definitely disappeared.

Syphilis is not easily and readily diagnosed.

And syphilis might readily be detected in the primary or early secondary stage, but this is not a disease of continuous symptoms. Syphilis, however, is periodical, and

in the intervals between the outbreaks, when it has undergone one of its customary eclipses, there may be no unequivocal evidence of the disease present, and, since leaving no stigma or trace of their existence, it may happen that a syphilitic is examined during the second or even the latter half of the first year, and no positive and unmistakable evidence of the disease is found.

Patient may deceive physician.

In ordinary practice the physician may base his diagnosis upon the history of previous lesions furnished by the patient, all of which may have disappeared to the time of examination. It is probable that a syphilitic patient wishing to marry would select a period of exemption from all visible signs of the disease for the examination, and moreover, that he would withhold all testimony as to previous symptoms which would incriminate him as the bearer of disease.

And again, the possibility of substitution could not be guarded against. A man with active syphilis who is so unprincipled as to wish to marry would have no hesitancy to pay or otherwise persuade a healthy man to take his place and thus obtain a certificate by fraud. "It is always dangerous to place the honesty of a man against his interests."

The law should be uniform.

Moreover, such a law, in order to be effective in its operation, should be uniform in all the states of this country —which is hardly to be hoped for; otherwise, a person knowing himself to be affected would arrange, upon some pretext or another, to cross over the borders to another state in which no such restrictions are applied to marriage.

Law would promote celibacy.

Finally, the practical effect of this law, assuming that it were adopted in all the states, would be to promote celibacy by rendering marriage more difficult even to those who are entirely free from all disqualifying risk in

the way of disease. Many sensitive men, and refined, modest women would forego marriage, rather than accept it under conditions which the former would regard as humiliating to their pride, and the latter an outrage upon their modesty.

Early marriage a safeguard.

Marriage, especially early marriage, is the surest preservative against immorality and its diseases.

It is generally recognized that the greatest social danger of the present day proceeds from the growing unpopularity and consequent fewness of marriage. Marital and other social conditions being such as to discourage early and fruitful marriages; tends to defer marriage until a later period of life, when the productive energy of the couple is lessened.

Observations show that as a rule, every obstacle thrown in the way of marriage is distinctly anti-social and to a certain degree immoral in its tendency.

Parents may now demand certificate.

As it now stands, any parent may demand of the aspirant to the hand of his daughter a certificate of exemption from any venereal disease, or sexual disorder, as a condition of his consent to the marriage.

If the man should refuse to furnish such a certificate it may be fairly considered presumptive evidence of his inability to produce it.

The Feasibility of Such a Law Is Doubtful.

Law to be effective must have the co-operation of the public.

A LAW may be placed upon the statute books, but without the consent and co-operation of the public, it cannot be enforced.

There are laws in Massachusetts, New Jersey and other states, according to which fornication, etc., are punishable by fine or imprisonment, but are dead letters, they are not sustained by public sentiment.

Such a law does not prohibit prostitution; it does not

punish a man for contracting disease; it is based upon the broad principle that no human being is justified in communicating his disease to another; whether intentionally or not; especially in the relation of marriage, where the victims are powerless to protect themselves.

As an illustration, in the crusade against tuberculosis undertaken by sanitary authorities in this country, it has been found that enlightenment alone of the public in regard to its dangers and modes of communication is not sufficient. It was found necessary to impose a legal responsibility to suppress what is regarded as the prolific means of its spread. If public sentiment upholds the board of health in imposing heavy fines for spitting on the floor of public conveyances, with remote possibility of the sputum containing tuberculosis germs, and the still more remote possibility of its proving a source of infection to others, surely it would sustain a law penalizing the transmission of a serious disease fraught with such terrible consequences to the health and life of the family.

The law has so far curtailed the vested privileges of an individual in his own life that it punishes as a crime any suicidal attempt—would the proposed law be considered an unwarrantable restraint of that individual liberty which now permits a man to infect his wife and kill the children who owe their life to him?

The medical profession should unite in the effort to secure legislative enactments which will impose a civil and penal responsibility upon such an action, whether it be the result of culpable ignorance or criminal imprudence.

THE SCOPE OF SUCH LAW.

Theory and necessity of such a law.

THEORY and necessity of such a law based upon the infection of the innocent, those who are in most cases as helpless as infants, and as incapable of protecting themselves.

The law would not necessarily apply to the communication of the disease in relations known as prostitution —to those hiring their bodies or those who seek the gratification of their lust in the companionship of lewd women.

There can be no question that in the interest of general health, such a law, which should be universal in its scope and application, would be desirable to prevent the spread of venereal disease by narrowing the responsibility down to the question of individual accountability.

There are practical objections no doubt.

There are, however, certain practical objections to its general application; due to the difficulty or impossibility of positive identification of the origin of the infection in a disease like syphilis, especially under conditions when promiscuous intercourse has been indulged in, the penalty could not be inflicted because lack of proof.

Might lead to injustice.

Again, such a law might lead to unjust charges, blackmail, etc.

Moreover, the question whether a man or woman who indulges in sexual debauch would be justified in demanding legal protection from the consequences of such action, especially since such actions are usually voluntary, and knowledge of insecurity. It, therefore, would seem that there be no necessity for the intervention of the law in the protection of those who are well able to protect themselves.

Not only in infection in marriage, would this law find proper application, but in cases of seduction—where a man seduces a minor, who falls partly as a result of her environment and ignorance of the fact that the loss of her virtue may carry with it the loss of her health. The law should protect her from the consequences of her ignorance and the vicious social conditions which surround her.

Difficulty of proof might make the law inoperable.

It may be contended that such a law, although equitable and good in theory, would be inoperable because of the difficulties in furnishing proof.

To secure that proof, however, would be less difficult than in cases of adultery and many other crimes. It would be necessary to show that the complainant has the disease, and that the defendant has it, and, that the disease of the former is that of the latter, and, there must be a similarity of time and character between the evolution of the disease in the complainant and the existence of certain contagious accidents in the defendant.

The knowledge of wilful contamination could also be established. At the present day justices of courts rarely accept the theory that the man is under any delusion as to the existence of his disease or of the danger that he may convey it to others.

Again, another objection, and of more weight, is that such actions must be instituted by the injured party; the fear of exposure and publicity would deter most women from prosecuting their husbands upon such a charge. Hence, after all, the value of such a law would be chiefy educative.

The law would be chiefly educative.

At the present time, many men look upon the communication of venereal disease with no special consideration. This is due, rather to ignorance of the dire consequences, than to indifference or insensibility.

Their appreciation of the significance of its consequences being largely influenced by the attitude of the law towards such an action; and if that law does not condemn and punish it, they do not attach criminality to it.

Therefore, if the law would decree that the infection of the innocent with venereal disease is a crime, punishable with fine and imprisonment, it would not only awaken their conscience to its dire significance, but also to their

selfish perception of its danger. The mere existence of such a law upon the statute books do much to educate the public to the idea that the transmission of venereal disease is not a slight offence, but, that it is a crime against society; and that a man should be held responsible for the consequence of such action.

It may appear that a law punishing the transmission of venereal disease in marriage is inconsistent with the idea that a woman should not plead venereal disease communicated by her husband as a ground for divorce.

It is self-evident that a woman who seeks a divorce upon the plea of venereal infection by her husband should be fully informed of the ordeal before her.

In the first place, it would be necessary to furnish proof. For while the existence of syphilis, for instance, in the wife may appear a *prima facia* evidence that she has received it from her husband, is by no means conclusive to the courts. She must prove (a) that her husband has syphilis; (b) that she has syphilis; (c) that the syphilis of the husband is the origin of her own. Besides, she must reveal certain secrets of private life—often disgusting details of shameful indignities to her person; and she must be prepared to face the inevitable disgrace, scandal, and publicity of divorce proceedings; she must appear in court, or before a referee, and testify to humiliating experiences, which are not always carefully guarded from the public. And if her husband defends the suit he may falsify, and plead as a mitigating circumstance that he thought he was cured, did not know his disease was contagious, that the infection was involuntary, etc. And if successful, she will find that the purchase of her freedom was at the price of humiliation and shame.

According to our present laws, the guilty is not deterred by fear of punishment. He knows that his act does not constitute a crime, and that he will not be punished by the law.

If it be laid down as a principle of jurisprudence, that it is a criminal action, punishable by fine and imprisonment for a man to infect his wife with venereal disease he has received from prostitutes, that will prevent many contaminations.

Such a law would be of special value as a deterrent force—it would act as a menace rather than a punishment which would frequently be applied.

If confronted by a conscienceless individual who persists to expose an innocent woman to dishonor and disease, could say to him, "Your proposed action is not only base, but will expose you to disgrace and punishment," would have a salutary effect. It would furnish the final argument now necessary to break the criminal obstinacy of a man who would wilfully adhere to his unscrupulous matrimonial plans despite the warnings of the physician.

CHAPTER LV.

Summary—Venereal Disease Should be Banished.

Chief cause of social evil.

IN OFFERING the foregoing observations upon the prevention of venereal disease of the married, there is no pretense of having solved what is termed "The unsolved problem of the social evil." The chief cause of this social evil, so far as we can apprehend is due to masculine unchastity, and has its basis in uncontrolled animal instinct, which is encouraged by the double standard of morality for men and women established by social convention. The predisposing and allied causes are certain adverse socio-economic conditions, coupled with aggressive solicitation of men, which induce the fall of women and their entrance into a life of shame.

Society is blinded.

Society is blinded as to the moral and physical evils that grow out of prostitution, through ignorance of their extent and significance.

Ignorance is fostered.

This ignorance is fostered by the false attitude of society toward these diseases, largely because of their traditional shameful character.

Evils of prejudice.

Popular prejudice frowns upon all attempts at sanitary control, forbids the education of the young in matters relating to sexual hygiene and the diffusion of knowledge respecting diseases which are most intimately mingled with the source of human life.

Measures of relief — measures need of moral influences.

Now, what measures of relief may reasonably be expected from the application of the prevention and preventative means proposed?

Beyond question, a reform in morals would constitute the most valuable and efficient means of prevention. But,

influences which act as a regenerative force upon the morals of people are proverbially slow in their operation.

Moral obligations which come in conflict with practices that have their basis in animal instinct, and in traditional usage, do not meet with ready acceptance. Still we believe that the education and training which aim to develop a higher morality in men will do much to check and diminish evil.

The same may be said of the administrative measures which have for their object the correction of adverse economic conditions which favor prostitution, that they do not promise immediate relief.

Material circumstances which affect the methods and means of living, the condition of labor, the economic dependence of women, and especially the grinding poverty, the force, of physical want which impels many of them along the road of ruin, cannot immediately be improved.

The state can effectively intervene in the protection of the wife, the mother and children by decreeing the transmission of venereal disease in marriage, a crime, punishable with severe penalties.

But, it will require time for the education of the public to an appreciation of the significance of these diseases as a social danger which in menacing the family, will also menace the welfare of the race.

It is self-evident that such an education is essential to the formation of public sentiment which will sanction and sustain the enforcement of such a law.

Whatever may be said of the value of the remedies proposed, the fact is irrefutable that no moral reform, whether realized, or not; no legislative enactment that appear feasible or not; no repressive force, whether justified or not; and no sanitary measures whether practical or not, promise to be immediately available which would eradicate the evil.

It requires time for the operation for these slow-mov-

ing forces; but unquestionably much can be accomplished from the start—the meager mentioning of these facts will set many to think before they act, and so prevent the harm.

No time should be lost.

Remembering that the laboratories of vice turn out new cases of infection every day and night, which is introduced into families of every rank and order of society, no time should be lost to apply every available means of prevention.

From the foregoing studies it would appear that the true, and most effective remedy available to modify or lessen these evils, moral and physical, from venereal diseases, is the proper dissemination of knowledge respecting the dangers and modes of infection of these diseases.

Due to ignorance among the laity.

It is through the force of enlightenment, and by combating the dense ignorance prevailing among the laity, especially among the young, upon whom the diseases fall most heavily, that these evils can be diminished.

Not only is a remedy immediately available, but, if it acts at all, it acts as an immediate protection.

This remedy if applied today would lead to an avoidance of exposure, and act as a preventative tonight.

If in addition to the education in sexual hygiene, the young man is also instructed in the knowledge of the fact that venereal disease is almost invariably concomitant with licentious living; and, that such indulgence is not wholesome for him; that carries with it consequences to himself and others, often disastrous, that may impair his health, vitiate his manhood, and lead to a forfeiture all those hopes and aspirations which to be fulfilled in a safe, fruitful and happy marriage, will cause him to pause and consider more seriously.

Dread of disease a great factor.

The man who will not heed such instruction; one who will continue despite such warning, to give himself up to

sexual debauchery should not be allowed to infuse the vile taint of prostitution from prostitutes into the pure young woman who receives him as her husband.

Such a crime, entailing suffering, disease, and death upon the innocent, should no longer be possible.

Every means of prevention available.

All moral, sanitary, and legislative power, should be united to prevent the commission of such abominable cruelties. In the interest of the human race, in the interest of virtuous wives, who should no longer be contaminated with foul infections; in the interest of the children, who should no longer be deprived of their rightful heritage of vitality and vigor; the dreadful curse of veneral disease should be banished from the marriage relation.

Measures that will banish venereal disease.

The only measures that will prevent venereal diseases is proper education of conscious fear of consequences, and fear of God.

Of these, consciousness and fear of eternal punishment must be our chief reliance, if we would banish the evil from the family and from the race.

CHAPTER LVI.

Some of the Ordinary Diseases and Disorders and Home Treatment.

Preliminary.

WE SHALL not attempt to write a full treatise on diagnosis and treatment of diseases, that would require more space than is allotted for this division, but we shall endeavor to give a brief and clear instruction on some of the common troubles that appear in the family, and more especially in women and children, along the lines of the chief object of this work.

A few things that should be uppermost in our minds regarding health.

Preliminary to this chapter we wish to call attention to a few things that should be observed by those who possess children, and desire if possible to not only retain their inherent health and vigor but to improve the same.

Constitutional weakness, susceptibility to disease and degeneration of the race is not only due to faulty selection in marriage and unsuitable married life, but also to misdirected care in the rearing of the infant and child; this becomes still more important from year to year, as they near manhood and womanhood.

Whether the adult then has grown to be of normal health and vigor, largely depends upon the care and training they have enjoyed during all these years. While it is true much depends upon the care in infancy and childhood, there is more danger as years roll on; mostly because parents pay closer attention to their children the first five or eight years of their life than afterwards.

Age of greatest danger.

During the youth and pubescent age —just before and during the time when they emerge into manhood and womanhood—both, boys and girls are in the greatest danger—

of physical as well as moral injury, and need special observation and care from their parents. It is during this age when so much damage is done through ignorance and omission of duty—damage that can never be corrected, nor repaired. In early life there is not much difference in the two sexes, and need about the same attention; but the girl requires at all times to have some special care. As she grows nearer to womanhood, she becomes more susceptible to functional disorders, many of which can be avoided through early observance, care, and instructions by her mother. When discussing disease of the adult, we shall dwell more particularly upon diseases of women; their sexual organs are such, that they are more susceptible to functional derangements, chronic diseases and disorders than men.

Diseases of women more prevalent than in men.

The functional disorders and disease if not corrected early may result in derangement of the general circulation and nervous system, not only of the female organs, but also of the nervous and muscular system of the abdominal organs.

As a rule internal medication is powerless, and surgical interference is not indicated.

There are altogether too many operations performed for these maladies. For example ovariotomies (removal of ovaries) is rarely necessary and seldom justifiable.

In the early stages ordinary home treatment often effects a prompt cure. In advanced and complicated cases the treatment will be more difficult; we will speak of this in a later paragraph.

CHAPTER LVII.

Sexual Deformities in the Female.

DEFORMITIES of the sexual organs may exist in early girlhood, but often they are not discovered until after marriage. In the majority of cases no home treatment will correct these troubles; then the assistance of the physician must be sought. One of the hindrances common in young girls and women is, that they dread to be examined by a physician and so let the case go from bad to worse.

Girls rarely need local treatment.

Girls, virgins, rarely need an internal examination, but if needed that should not stand in the way of obtaining needed help. Mothers should intsruct their daughters about this matter. Many young girls and women become permanent invalids because they dread to have their maladies treated. So with married women, whenever there are disorders that will not yield to home treatment after a reasonable time, they should submit to a thorough physical examination by a reliable physician. "Stitch in time saves nine," holds good in all such cases.

Not only is it necessary that local examination of the sexual organs be had, but also treatment of the disorders and diseases that exist. Internal medication may do little or no good, while local dressing of ulcers, inflammations, etc., and corrections of misplaced and indurated organs may be overcome without serious inconvenience, while if delayed would become serious, and may not yield to local treatment at all or only to surgical operation.

The internal deformities and displacements of sexual organs and attachments found in women are in most cases remediable; and the diseases that are common among so many, are so various in character, that it is not possible to give directions for home and self-treat-

ment, it is of the greatest importance to properly diagnose each case separately before any attempt to treat such diseases, and to do this right, and safely, requires the services of a competent physician.

CHAPTER LVIII.

MENSTRUATION—MENSTRUAL DISORDERS—PRECOCIOUS DEVELOPMENT AND MENSTRUATIONS.

Menstruation before the age of puberty.

WHEN development and menstruation occurs in a child before the age of puberty at twelve or thirteen years, it is called precocious. Development of the sexual organs in girls, has, in exceptional cases taken place long before the normal age of puberty. Fully developed generative organs have been observed in infancy and childhood. The author will mention one instance of his own experience where a mother brought her little girl of 42 months of age with fully developed breasts and generative organs, and the body as a whole shaped as that of a perfect woman. In some of these instances of precocious or early development it is said premature menstruation does not occur, in other it makes its appearance several years before the normal age of puberty, and in a few cases of record, apparently physiologic menstruation occurred soon after birth.

Appearance of discharge.

The appearance of bloody discharge, even if it is periodical, is not necessarily to be attributed to menstruation. Such a discharge may occur as a result of tumor erosion, ulceration and other diseased conditions at any period of life from infancy to old age. It is well to consult a physician in such cases for the sake of safety; ordinarily there is no need for treatment—except a mother's care and watchfulness for moral dangers and for cleanliness.

CHAPTER LIX.

Menstruation—Monthly Periods—Monthly Sickness—Menstruational Flow.

Monthly periods. MENSTRUATION is an intermittent function characterized by a bloody mucus discharge from the womb. It usually begins with puberty and ceases with the menopause or "change of life."

The menstrual cycle covers a period of about twenty-eight days, and the flow continues normally from three to seven days, the average amount during this time is from four to five ounces.

It is absent during pregnancy and lactation with few exceptions. In numerous cases periodic hemorrhages occur during the entire course of gestation.

Painful menstruation. Painful menstruation, is always a symptom (proof) of some wrong or diseased condition with the sufferer.

The normal flow is preceded by a sensation of weight in the pelvis. The average length of the menstrual life is from thirty to thiry-five years. Its duration is influenced, however, by various conditions called by physicians—physiologic and pathologic causes.

Duration of menstrual period of life. A WOMAN who menstruates early, as a rule, continues to do so longer than one who reaches puberty later in life.

Various forms of pelvic diseases, such as tumors of the uterus, tubes, ovaries, and inflammation may influence conditions. The management and care of woman during the menstrual period is based upon common-sense principles and general laws of hygiene. During the first twenty-four hours of flow the pelvic organs are intensely

congested, and it is therefore advised for a woman to remain quiet in her room in bed or lying on a sofa. Her duties subsequently should be as light as possible, long walks, riding, or cycling should not be indulged in during the period of the flow. Cold bathing in any form should be avoided as it tends to check the flow and bring about chronic congestive conditions of the pelvic organs. For the same reasons exposure to the inclemencies of the weather and sitting in drafts should be carefully guarded against.

The laws of cleanliness should be strictly enforced, the body kept clean, and the skin active by general sponge bath with warm water and soap, the discharges are apt to become rancid and offensive, especially in warm weather. The napkins should be changed frequently and not allowed to become oversaturated.

Vaginal injections.

Vaginal injections should not be employed while the flow continues unless ordered by a physician for therapeutic reasons. Sexual intercourse should also be avoided, as the congestion of the pelvic organs is increased by the act of copulation and may result in chronic inflammation and other pelvic troubles.

CHAPTER LX.

The Menopause, or Change of Life—The Climacteric.

Change of life.

IT IS the end of the menstrual period of life in women; and usually occurs between the fortieth and fiftieth years of their age. It is that epoch in the human female when she ceases to menstruate and bear children. Cases have been recorded in which menstruation has ceased as early as the twenty-second year, and also when it continued to over eighty years of age. As a rule early puberty is followed by a late menopause, and late puberty by an early cessation of the menstrual flow.

The appearance of the change of life is influenced by hereditary conditions, and the daughter is apt to reach the climacteric period at the same age as her mother.

The duration of the climacteric, like puberty comes on gradually, and continues as a rule, from two to three years or longer. In rare cases it may be brief, menstruation continuing regularly up to a certain date when it stops and never returns.

The female organs, the womb, ovaries, etc., shrink and become less active. The general contour of the body changes, and the individual becomes stout and matronly looking, or she may lose flesh and become thinner than before, but usually more stout.

Should be attended with no disturbances.

Normally, menopause, is attended with few local and general disturbances, and apart from the gradual or abrupt cessation of the menstrual flow, there are no symptoms to mark the changes that take place in the sexual life of the woman; but occasions of heat and chilliness may be noticed, these need not cause any special alarm or attention.

Unfortunately, however, a large number of women

suffer more or less severely during this period of life with a variety of symptoms from the circulatory, nervous and digestive system, as well as the pelvic organs themselves; and we shall speak of the most important ones in order that they may be recognized and their significance more fully appreciated.

Abnormal flow—hemorrhage.

Abnormal bleeding and *hemorrhage,* when profuse menstruation or irregular hemorrhages occur, they must not be attributed to the change of life. The same is true of irregular bleedings which take place after the climacteric has been established, and of hemorrhage which sometimes occurs long after menstruation has ceased.

These phenomena always denote some diseased condition and physical examination is certainly required, which will usually reveal the presence of ulcerations, uterus polypus, fungoid growths of the inner lining of the womb or cancer; most of which may be successfully treated if taken in time.

Treatment.

The treatment and management of menopause may be classed as routine, and special: The routine treatment chiefly consists in keeping the patient's health in the best possible condition, by careful attention to the laws of hygiene and investigating at once any unfavorable symptoms which may develop. The bowels should be evacuated (moved) daily, and any tendency to constipation should be corrected by mild laxatives.

The occasional use of saline is specially beneficial. The state of the kidneys should be carefully watched; the patient should keep the kidneys well flushed by drinking three or four pints of water daily, and any tendency to chronic troubles looked after.

Frequent examination may avoid disease.

At the beginning of change of life a thorough local examination should be made and if there are any ulcerations or lacerations of the perineum or the cervix they should

be repaired to guard against prolapse of the pelvic organs or possibility of internal cancer. Ulcerations, indurations, inflammations, etc., may lead to cancer. Many cancers in women could have been avoided if proper treatment was had.

Retarded or *delayed menstruation.* If the menstrual flow does not appear before the individual is fifteen years of age, it is considered to be retarded or delayed. It is not uncommon for healthy girls to begin their menstrual life later than the average times of puberty and cases have been recorded in which the flow appeared for the first time at thirty-one years of age.

Retarded menstruations.

Retarded menstruation may be due to hereditary influences or it may result from a congenital cause or tardy development of the internal organs of generation. The uterus or ovaries or both may be absent or only partly developed and absence of an open canal. And again, delay may be due to bad hygienic conditions, such as hard work, over-study, poor or improper diet, tainted air, chlorosis (green sickness) consumption, congenital syphilis, and other constitutional diseases.

Treatment.

The treatment is based upon the cause and is further discussed under amenorrhea.

Menorrhagia.

Prolonged menstruation.

An excessive or prolonged menstrual flow the cause of which may be due to obstructed general circulation, displacement of the uterus, chronic uterine and ovarian inflammation, foreign substances in the uterine cavity, pregnancy, tumor, fungus growth in the uterus, cancer, etc.

The treatment, after the cause has been determined, is the treatment or removal of the cause.

It is impossible to discuss the treatment of many of the general causes in a work like this; the subject is

too varied and large. However we may refer to such of the causes that are within the means of every one to discern.

Diet may have much to do with constitutional causes of these troubles. The food should be simple, nutritious, easily digested, and not stimulant, meats should be used moderately, and over-eating is to be avoided.

Alcoholics harmful.

Alcoholic stimulants and coffee should not be indulged in. Care of the bowels is important, keep them regular, constipation causes pelvic congestion and increases the amount of bleeding.

The intestinal canal should be flushed with a saline purgative twice a week, castor oil is one of the best purgatives in such cases.

Local treatment need not be discussed at this time, because that must be relegated to the physician or gynecologist.

METRORRHAGIA.

Abnormal uterine hemorrhage.

Uterine hemorrhage, occurring independently of the menses. Most causes for this are situated in the womb itself, and among them are the following:

Subinvolution of the uterus (incomplete involution); retained placenta (after-birth); uterine fibroids; polypi; carcinoma (cancer) and fungus growth of the endometrium (lining of the womb). The last mentioned is the most frequent cause. The treatment should be at the hands of the physician or gynecologist.

However, a few timely suggestions will not be out of place at this time, even to the physician, as follows:

If the hemorrhage is due to incomplete involution, packing the womb with iodoform gauze in most cases will result in quick relief.

If due to fungous growths in the cavity of the womb, which often is the cause of such hemorrhage, packing of

the womb with iodoform gauze will bring desired results. This may have to be repeated every 24 or 48 hours, three or more times.

If due to retained placenta (after-birth) and if already decomposing and infectious, and if septic fever has made its appearance, the treatment differs somewhat.

The safest treament now is by wrapping an applicator with sterile cotton, to the extent of about five inches, so that not all will enter the womb and may easily be withdrawn if separated from the applicator, saturate about three inches from the end of this with 95 per cent phenol, carry this into the cavity of the womb leaving it in place not more than ten seconds, withdraw, and replace with a similar applicator saturated in 95 per cent alcohol, this should remain in position about one minute; then pack moderately with iodoform gauze, so that the secretion may escape into the vagina.

A cotton tampon, saturated with a solution of 5 per cent ichthyol in glycerine should follow this.

This will act as an antiseptic, and empty the womb of its septic material, without pain or injury to the mother.

This treatment is far safer than a curettge and will save the woman's life every time if done in the early stage of sepsis; and often when the disease has progressed far into the danger zone.

These instructions can be carried out, only by a physician; and should be carried out in the sick-room of the patient.

Amenorrhea.

Absence of menstruation.

"Absence of menstruation." Under this definition are included acute suppression of the menses from cold, scanty menstruation and concealed, such that are due to imperforation or absence of a normal opening of the canal; absence of the reproductive organs or to failure of those organs to develop; menstruation may have been estab-

lished at puberty, and disease may have caused its cessation; the cause remains for the physician to determine.

Exhausted system.

Exhausted state of the system is the most frequent and important cause of amenorrhea—the absence of menstruation being due to the fact that nature cannot afford to expend the necessary amount of blood and nerve force required to carry on the function, and suppression of the menses are the result, not from any local pelvic disorder, but because the woman's system is unequal to the demands made upon it.

This may be observed in chlorosis or what is known as the "green sickness" in girls, or any exhaustive disease. Tuberculosis, cancer, etc. Then removal of the ovaries, tubes, etc. Amenorrhea is not necessarily at variance with health, except in cases in which the cause affects the general health of the individual.

Treatment.

The treatment depends upon the cause. A careful study of the entire system must be made before resorting to any treatment—theraupetic or hygienic.

In this complaint diet is important—should be plain but nourishing and easy of digestion. Care of the bowels and bladder; bathing, exercise and rest. Electricity and massage may be of value in some cases.

SCANTY MENSTRUATION.

Like absence and suppression is a relative condition—arising from similar causes as does amenorrhea. But the normal flow may vary for different women between two to six days—that is a flow of two days duration may be normal for a woman who cannot afford to lose much blood, while for a very plethoric (full-blooded) woman a much longer period of flow might be normal. A material decrease or increase, however, from the normal amount for a given individual should give rise to suspicion of diseased condition.

The treatment is always along same line as that of menorrhagia and amenorrhea.

Vicarious or "False Menstruation."

False menstruation.

Is a periodical discharge of blood from other parts than the womb. It may occur with either absence or with a scanty menstruation; it usually appears at about the time of the regular flow. The nose is the most frequent site but it may come from the nipples or from an open sore from the lungs, larynx, bronchial tubes, gums, stomach, rectum or from an old scar.

In a large proportion of cases of unusual menstruation the condition of the blood, the nervous system, and nutrition is below par, and careful attention must therefore, be given to the general health of the individual. This disorder is closely related to amenorrhea and with scanty menstrual flow.

Treatment.

The treatment is necessarily directed toward establishing the normal functions of the uterus and its appendages. Warmth, moderation of exercise, and a glass of hot water four or five times a day is beneficial.

Dysmenorrhea.

Painful menstruation.

Dysmenorrhea is painful menstruation. The majority of women suffer more or less general and local discomfort at the time of the menstrual period, but the symptoms are not marked, and in no way interfere with their habitual mode of life; in comparatively rare instances menstruation is unattended with any subjective symptoms. The causes generally are due to neuralgia, pelvic congestion and inflammation.

Malformation of the organs.

Malformation or undeveloped genital organs; obstructions in the canal of the uterus either due to absence of an open-

ing, or that opening is too small, stricture or inflammatory condition of the neck of the womb; anteversion—the womb bending forward so as to close the canal. Gout and rheumatism may produce disturbances and cause painful menstruation.

Treatment. Treatment consists in attacking the cause—general treatment and hygiene heads the list. Hot sitz-baths often relieve the pain. Hot foot baths, drinking of several glasses of hot water, etc.

Much depends upon diet, care of the bowels, bathing, proper clothing, rest, and exercise, massage may be of help; hot vaginal douches at time bring relief. The aim must be to obtain normal health of the whole body and functions of the pelvic organs.

Each case is to be treated according to the particular needs for that individual. Hence it would be useless to cite indicated drugs for general treatment. The pain if severe should be relieved, but there should be no opiates used, unless at the direction of the physician—they are not curative, but may do great harm.

Hot stupes. Hot stupes, a towel wrung out of hot water applied to the abdomen covered with oiled silk, may be kept warm with a hot water bottle. Hot water sitz-bath for a half hour at a time, keep the water at about 100 degree F. by adding hot water. Peppermint tea may be of benefit the first two or three days.

Spicy diet and alcoholic spirits should be avoided.

Hot vaginal douches may relieve the pain promptly—these are of much importance especially to relieve congestion due to cold.

The douches should be administered with a fountain syringe, the patient lying on her back with the buttocks over a douche pan—and use two quarts of water at 115 degrees F.

CHAPTER LXI.

Diseases of the Ovaries and Appendages.

Ovarian troubles and treatment.

AS IN other organs of the female pelvis, so in these we have disorders and malformations that interfere with their functions, the treatment of which of course depends upon the cause. *The home treatment* is on the same plan as that of other organs, the womb, etc. But as the disorders and diseases of these organs are mostly obscure, and often complicated, the home treatment should be if anything with more caution than for other simple organs, don't do too much, and don't wait too long before calling for the physician if simple remedies do not give prompt relief.

Most inflammatory conditions may be treated quite successfully by the gynecologist or by the family physician. Cysts of the ovaries if taken in hand early and properly treated are in most instances fully cured by local and general medication, massage, etc.

Local treatment most important.

Inflammation and swelling of the ovaries and appendages should receive prompt and proper treatment by the physician.

Nearly all such cases are curable by local treatment in the early stages.

The ovaries and their appendages are amenable to local medication, massage and manipulation with the fingers of the gynecologist.

This form of treatment requires some skill, considerable time and patience on the part of the physician and the patient; but when successful the woman retains the functions of her organs and has a better chance to live a natural and comfortable life than by the removal of even

parts of her organs or glands.

Many ovaries which give much trouble can be healed by persistent and proper local treatment, even cystic ovaries are in nearly all cases amenable to local treatment and permanent cure.

There are altogether too many ovaries removed, and that for trivial causes.

Why should an inflamed or a swollen ovary be removed?

Why should a cystic ovary be removed?

Should we not be able to treat those organs as others of the body are?

The ovaries are so situated that they are amenable to various forms of treatment.

PRURITUS VULVA.

Intense itching of the vulva.

Is an irritable condition of the terminal sensory nerves, which is characterized by inflammation and intense itching of the vulva and surrounding parts. The causes chiefly are: disease of the vulva; irritating discharges; parasites; congestion; habitual irritation; the menopause and old age; uremic disorders, colds uncleanliness, etc.

Treatment.

The treatment depends upon the cause and extent of the trouble. Cleanse with soap and hot water; a cloth wrung out of hot water and applied to the vulva before the patient goes to bed may relieve or prevent paroxysm which comes on after retiring. A wash containing one ounce of sulphate of magnesia, and one ounce of bicarbonate of soda in a pint of hot water, may not only relieve but cure the itch due to uric acid, etc. In case of parasites, a strong infusion (or tea) of tobacco, both as a vaginal douche and vulvar compress may be most efficient. Hot sitz-baths may be beneficial. The treatment of the disorder, if due to diabetes, uric acid, or other organic diseases, must in-

clude appropriate diabetic and general treatment.

A Word About the Use of the Fountain Syringe and Vaginal Douche.

This instrument should only be used for good reason, when needed to help nature. In cases of vaginal inflammation, ulceration, etc. Nature provides an exudate for those parts which no artificial means can supply. This however, may be and is interfered with through illness, or disorder of some sort, and then it is that the use of the fountain syringe is useful.

The misuse or too frequent use of the fountain syringe may be injurious, because that interferes with nature's supply of the natural secretions of those parts. The vaginal douche, for combating these disorders plain hot water is the best. Not less than two quarts should be used. It should, as a rule, be taken as warm as the patient can bear it from 110 to 120 degrees F.; but some women have so little perception of heat in the vagina that they scald themselves, and in some, hot water increase their pain. Then luke-warm water should be substituted. Cold fluids are injurious, and should not be used.

How to take a douche.

The patient lies in dorsal position on an inflated cushion or rubber sheet; allowing the nates to rest over a douche pan. The fountain syringe should not be more than twelve inches above the woman's body, so that the water will flow slowly and with little pressure. In chronic cases vaginal douches are given morning and evening, in acute cases it may be well to administer them three times a day. As an emollient, douches with flax-seed or slippery-elm bark (a heaping teaspoonful to the quart) are useful. Or, two teaspoonfuls of salt to the quart of water may do well in selected cases. Other than these remedies should be used after the direction of a competent physician.

VENEREAL DISEASES.

Gonorrhea and syphilis.

Gonorrhea and syphilis produce pathologic (diseased) conditions that are peculiar to women.

Gonorrhea is the most frequent cause of those grave pelvic diseases which result in loss of life, sterility, and chronic invalidism.

When the infection attacks the urethra the effects are the same as in the male; but when the vulva is the seat of disease, the specific inflammation is liable to enter the ducts of the vulva-vaginal glands and cause abscess or a chronic form of gonorrhea, and the specific virus may extend to the uterus and its appendages, as well as the peritoneal cavity. A most important reason for prompt attention. The gonococcus (germ of gonorrhea) may remain inactive in the crypts of the mucous membrane, liable at any time, even while quiescent in the individual, be communicated to another. Hence many innocent and previously healthy women, shortly after marriage to a man who supposed himself to have been cured of gonorrhea years before, may by contact with erstwhile dormant virus be infected and get a destructive gonorrheal infection of the genito-urinary organs. This explains the fact that an apparently healthy subject may infect his hitherto uninfected wife, and become again infected from her, i. e., the gonococci by passing through the new culture (or soil) of the wife again becomes virulent for the husband. In due time each becomes tolerant of the germ, which however may develop acute infection in another person. This laden germ is also the cause of so many of the new-born having sore eyes, and the majority of infantile blindness is due to that condition in the parturient tract of the mother.

Germs may be inactive for time.

Caution before marriage.

Therefore, persons knowing that they were once infected, before entering marriage should consider it their

duty to make sure that they are cured. Even if years have elapsed since the disease has been noticed, they should submit to critical examination and be under the observation of a physician for at least six months before they can be sure they are free of that disease. *Inflammation* of the vagina, which takes place in one to three weeks after marriage, should at least be a cause to suspect specific infection and brought to the attention of the physician at once.

If found to be non-specific it needs attention so as to avoid serious constitutional disease of which it may be a symptom; but if found to be such a specific infection then there should be no time lost to have the disease cured. By this time, both husband and wife are infected and both must be treated; best by the same physician.

Prevent syphilis to the offspring during pregnancy.

Pregnant women who suspect that they are afflicted with syphilis (hereditary or acquired), should take anti-syphilitic medicine while in that state, then the child will not inherit the disease.

Treatment for syphilis during pregnancy should not be attempted by injection of medicine or serum, only medicate by mouth or external application.

Those who discover their sex organs in any way unwell should not have sex-intercourse until the obrasions are fully healed. Syphilis can be transplanted only by open sores.

Three reasons.

There are mainly three reasons why sex abuses should be avoided. First, for the love of God; Second, for fear of God; Third, for fear of physical depravity and misery.

Among luke Christians and non-believers the latter may be the main reason for avoiding those evils. The human needs to be religious to enable him to be humane.

CHAPTER LXII.

Marriage and Syphilis.

THE problem of syphilis differs from the problem of the ex-gonorrheal patient. When a gonorrheal patient is cured so, far as infectivity is concerned, and is not sterile, there is no apprehension as to the offspring.

Gonorrhea is not hereditary, and the child of a gonorrheal patient does not differ from the child of a non-gonorrheal person. In case of syphilis, it is different. The patient may be safe so far as infecting the partner, is concerned, but, yet, there may be danger for the offspring.

The rules for permitting a man or a woman who once had syphilis to marry therefore, are different from these applied to the gonorrheal patient.

The following rules are reasonable:

1. No syphilitic patient should marry or should be permitted to marry before five years elapsed from the day of infection. But, the period of time alone is not sufficient, other conditions must be met before we may give a syphilitic patient permission to marry.

2. The man or woman must have received thorough systematic treatment for at least three years, either constantly or off and on, according to the physicians judgement.

3. For at least one year before the intended marriage, the person must have been absolutely free from any manifestations of syphilis; that is from any eruptions on the skin, from any mucous patches, swelling in the bones, ulceration, etc.

4. Four Wassermann tests, taken at intervals of three months and at a time when the patient was receiving no specific treatment must be negative.

If these rules are fully met then the patient may be considered free from syphilis, and need not hesitate to marry.

In case both, the man and the woman are or have been syphilitic, they may marry without hesitation, as the danger of infection is absent as to themselves. But their offspring are in danger of inheriting the disease; regardless of the time that may have elapsed from the period of infection, regardless of the Wassermann tests or treatment, the danger to the child if both parents have syphilitic taint in them. Healthy children may be born from two syphilitic parents who have undergone energetic treatment, but, the question is have we the right to take the chance?

Locomotor Ataxia or Paresis.

There is another point to consider in dealing with syphilitic patients.

A patient who did not receive energetic treatment from the beginning of the disease as also those whose treatment was desultory and irregular, not withstanding a negative Wassermann reaction some trouble may develop in later life.

For example, a case in point of this:

"A man came to his physician for examination with his fiancee. He had contracted syphilis ten years previously, received irregular treatment for a month, off and on. For five years, he had no symptoms of any kind. He considered himself cured, but wanted to know, and his fiancee wanted to know, whether he really were cured. There were no symptoms of any kind and the Wassermann test was negative. Nevertheless, the physician did not give him a clean bill of health. He noticed in the patient what seemed to be a slowness in thinking and some slight hesitation in his speech.

The man was thirty-five and she was thirty-two years

of age. The physician told the girl that he could not render a definite decision in the matter, that everything might be all right, and then, again, it might not; but, that the question about children she would have to decide. She was satisfied so far as that was concerned. All she wanted to know was, whether she was in danger of being infected. She was told, tthat she was not, but that there was some danger of her husband developing general paresis or locomotor ataxia.

The girl had been a teacher for many years, and was anxious for a home of her own, and decided to take the risk. They got married; the marriage remained childless. The man, three years later developed general paresis (softening of the brain) and died about a year afterward.

The woman, now a widow, so goes the story, is not sorry for the step she has taken.

This shows what things our social-economic conditions and our moral code will make people do."

Infecting another is seldom wilful.

Remembering then that the damage has been done (seldom wilful) there is no time for remorse; there is no good reason for a quarrel. The only sensible thing to do is to go to a reliable physician—preferable both to the same one, who will instruct them how to regain the lost health.

Although the inflammation may be due to this unclean disease, it is useless to lament, or to hesitate as what to do, "*be a man, be a woman—make the best of it.*" In this way alone, there will be help and cheer. Waiting only means deeper infection. Lamenting and accusing one another only make things worse.

In order to have the quickest result, the physician should at once be given a true history of the case. No other person should be allowed to know anything about such afflictions; *friends can do no good;* but sometimes much harm.

The only certainty — sexual intercourse not a necessity.

The only certainty against this unclean disease, lies in a morally pure prenuptial life, refrain from all sexual intercourse before marriage.

This is not only possible, but is in the order of nature. Venereal diseases are the just fruit and consequence of illicit sexual congress: *Is that plain?* Any one afflicted with either of these dire diseases—gonorrhea or syphilis, should take a thorough course of treatment, and not marry until he or she is surely cured from the disease.

See special chapter for further study of this disease.

Syphilis

Is a communicable disease.

Is a communicable disease due to a specific poison; and is generally acquired by sexual intercourse, but may be transmitted in many other ways; by contact of the virus from syphilitic wounds on mucous membrane or into abrasions of the skin. In infants and childhood we find both, the acquired and hereditary forms. The infant may be infected by its mother at birth, but this is rare and can only take place when there are sores upon the mother at the time of birth.

Infection is more likely to be from a mother who contracts the disease after the birth of the child, and may occur through nursing or accidental contact by kissing, by wet nurses with venereal sores upon the nipple.

In public places by using a towel which a syphilitic had used.

The treatment.

Treatment by the laity usually consists in hygienic cleanliness and care that no virus is transmitted to other parts of the body, eyes, mouth and genitals. And that it is not spread to others by soiled napkins, handkerchiefs, towels, etc. The medical treatment is best left to the direction of the physician.

CHAPTER LXIII.

Chlorosis (Green Sickness), Brings Primary Anemia.

Blood poverty.

THIS is a form of anemia occurring in young women fourteen to twenty years of age, and is due to a deficient quantity or quality of blood.

Heredity, bad hygienic surroundings, and overwork are predisposing factors. The symptoms are those of anemia (blood poverty), a greenish hue of the skin; pallor and weakness without marked loss of flesh; perversion of appetite (pica) menstrual disorders; and a tendency to hysteric outbreaks. In some cases imperfect development of the muscles and generative system has been observed.

The treatment is fresh air, sunshine, moderate exercise, nourishing food, due rest in bed at night from 9 p. m. to 5:30 or 6 a. m., warm bath each day before retiring. Medical therapeutics—Iron compounds, as tonics, phosphates, etc. Regulate the bowels and bladder, use mild laxatives. Salines are first in rank.

CHAPTER LXIV.

Headache.

The most common complaint.

HEADACHE, is perhaps the commonest of all ills that flesh is heir to; an ailment so frequent that as a rule, it arouses little or no attention, neither does it excite solicitude as to the welfare of the patient.

Headache is not in itself a disease, but rather a symptom of disease, brought on by some disease or disorder that may be remote and unexpected. The causes are many; too numerous to attempt to speak of all—and we shall only allude to some of those which may be understood and at least to some extent be successfully treated by family remedies.

Headache due to organic disorders, such as disease of the brain, stomach, liver, kidneys, ovaries, uterus, etc., must be left to the physician. But these same organs may become disordered through over-eating, drinking, wrong eating and drinking, through indigestion, taking cold and getting chilled produce congestion of any or all these organs, and cause toxines to form in the bowels, etc., which may be prevented by removing the cause by regulating the diet, etc., and in many instances may be relieved with house-remedies, such that will empty the stomach, bowels and bladder.

A simple remedy.

Several doses of Epsom salts in hot water is often prompt in its action, Castor oil, etc., things that one is sure will do no harm. Those who are subject to headache, may find relief by drinking a glass of hot water before meals, and again two hours after meals. And those who are suffering with constipation and headache, by taking a teaspoonful of Epsom salts in a glass of hot water before breakfast or half hour before dinner, two or three times a week.

Never use cold water or ice.

Never use cold water or ice application on the head unless it be to follow out the instructions of a physician; as cold may be followed with serious complications, while in nearly all cases hot water will do every thing good that cold water can, without danger in any; two signs may be observed to advantage: when the face is pale, and head cool, put on hot water compresses, and if the face is flushed and the head hot, cool water should be put to the head, and hot to the feet; chilliness always demands hot applications to the feet, and to the body, and if possible hot water or hot lemonade internally.

Headache should not be treated but the cause of it.

Ordinarily, headache should not be treated as such, there is a cause for it, and that should be remedied.

Relief is not cure, but removing the cause is the rational treatment. Should such symptoms

not yield promptly to ordinary remedies, skilled help should be had, for fear that delay may cause other complications that may be serious.

MIGRAINE OR SICK HEADACHE, BILIOUS HEADACHE OR BLIND HEADACHE.

Bilious or sick headache.

Migraine is a neurosis characterized by periodical attacks of intense headache, usually on one side, and often is associated with visual stomachic and circulatory disturbances.

It is supposed that in many, it is hereditary. Is more common in women then men, and usually develops in early life. Anemia, stomach troubles, gout, overwork, eyestrain, menstrual disorders, overwork, prolonged excitement predispose to it.

Treatment.

The treatment suggested in headache, in so far as home remedies go, holds good here. Let it be said, that headache powders, tablets, etc., or patent medicines of all kinds prescribed for headache should be used with caution. If such things can be used once or twice in a month (the menstrual period excepted), they may not be harmful. But the better way is to consult a physician who will direct a remedy which one can use when needed without harm.

CHAPTER LXV.

NEURALGIA.

Intense pain in paroxysms.

IS A FUNCTIONAL disease of the nerve trunks, characterized by paroxysms of intense pain, and is a disease of adults. Women are much more frequently affected than men. It is said that heredity is a frequent factor. But when we consider that in almost every case we can trace it to a local cause; that seems usually not ranked as a cause. Those causes that seem to be most frequent are infections from caries of the teeth, or eye strain, toxic

agents in the blood, colds, anemia, chronic lead poisoning, organic disease, etc.

Not pain but the cause should be treated.

The treatment depends upon the cause which should be searched for and removed. The teeth, eyes, nose, stomach, bowels and kidneys. The blood and urine should be carefully examined, before any line of treatment is attempted. The home treatment may be laid down about as has been described for headache; get rid of toxines, keep warm, etc., hot moist applications may be of help.

Vertigo (Dizziness, Giddiness, Swimming in the Head).

Swimming in the head.

The symptoms are characterized by a sense of unstaple equilibrium in which the patient himself or surrounding objects appear to be in a state of rapid rotation (a whirling around sensation).

The causes are numerous, but the most frequent are toxic conditions due to organic diseases; and is a symptom in many infectious diseases, as cerebral anemia or congestion, disease of the ear, reflex irritation dependent upon stomach trouble, etc.

Treatment, regulate the bowels.

The treatment, of course, must be directed to the cause, and along the same lines as outlined for headache and neuralgia, getting rid of intestinal toxines, regulation of the bowels and diet may result in permanent-relief in many instances.

CHAPTER LXV SS.

Emesis—Vomiting.

WATERY or mucus vomit is noted in chronic gastritis (Inflammation of the stomach), in certain forms of nervous dyspepsia, in cerebral disease, and after persistent vomiting, as in cholera.

Billious or green vomit is not diagnostic of any special condition; it may occur in any case in which there are persistent vomiting or retching.

Bloody Vomit (Hematemisis), may result from the stomach, due to Gastric ulcers or erosions, (Ulcers of the stomach), Cancer, vitnous engorgement, rupture of bloodvessel, swallowing blood from the mouth, nose, or throat, vicarious menstruation, etc.

Treatment of Billious Vomiting by the laity: Omit all foods; Administer hot water, avoid cold water. Ordinarily, after taking several glasses of hot water until it comes up the stomach is cleared of billious mucus, and then let the patient drink another glass of hot water, rest in bed.

If vomiting is renewed then repeat the process of administering hot water as before. Follow this by giving the stomach perfect rest.

Ice dissolved in the mouth, often cures vomiting when all remedies fail. The administration of Zink sulphocarbolate tablets of 1 grain each, 1 or 2 every hour, three or four times, will correct the bowel ferments.

To children according to age.

CHAPTER LXVI.

Hysteria

Lack of self-control.

IS A PSYCHO-NEUROSIS characterized by *increased impressionability and lack of self-control;* manifested by a train of symptoms of the most varied character. Females are especially predisposed although occasionally developed in males.

It is most common in early adult life. Heredity is said to be an important factor, which however in the observation of many depends more upon training and habit than actual heredity. You find it mostly in those who were spoiled children, and coddled young adults, as in young wives who are spoiled by their over indulgent husbands. It is a way to gain desired attention, attraction and awake sympathy, and this to the extent that it finally does derange the victim's mind, by continual indulgence. The prolonged emotional excitement, such as worry, anxiety, disappointment, grief, and all mental strain that causes lower vitality serve to excite susceptible individuals; especially those who seek sympathy and attention.

Symptoms of hysteria.

Symptoms: Hysterical persons often complain of some of the symptoms that are found in neurasthenia, to which at times and certain cases it is closely allied. Mental and physical restlessness, and feeling of anxiety excitability, twitching of the face and limbs, laughing and crying. Local paralysis is common, aphonia (loss of speech) from paralysis of the vocal cords; dysphagia (choking sensation) from paralysis of the esophagus, etc. Convulsive seizures are a common manifestation of hysteria and closely simulate epilepsy. They manifest great desire for sympathy and this in conection with their weak will-power often leads them to feign symptoms which they

really do not have. Among the more serious mental manifestations may be mentioned delirium, ecstasy, catalepsy and trance.

Treatment.

Treatment must be directed to the mind and body; but especially the mind. To be successful the physician must be able to inspire absolute confidence and faith in the mind of the patient, and those around her must help by having faith in the doctor's ability to help.

She must be impressed repeatedly with the fact that her condition is a curable one, and that with thorough co-operation restoration of health will certainly follow. Suggestion consciously or unconsciously, is employed by every successful physician in the treatment of hysteria. The physical condition of the patient must not be neglected. General measures such as hydrotherapy, systematic exercise, fresh air, massage, electricity, etc., are valuable aids. Except to meet underlying conditions and combat special symptoms, drugs are of little value. Antispasmodics like asafetida in controlling abnormal nervousness. When hysteria is complicated by local disease special treatment will be required, but no operation should be performed for the relief of nervous symptoms unless there exists an actual organic lesion not amenable to other treatment.

Preventive treatment first importance.

Of all treatments the preventive is of greatest value. This consists first of all to train children how to control their temper and passions. Parents should never give in to a child's whims of temper and peevishness; be sympathetic, but do not allow a child to feign for the purpose of awaking sympathy, this should be observed no matter what the age may be. A young lady marries an indulgent husband who babies her, she soon turns this into peevishness and later hysteria follows. We find the hysterics mostly among the over indulged; avoid this then you will have very few hysterics.

CHAPTER LXVII.

The Nervous Woman from the Gynecologist's Point of View.

CAREFUL study of the cause (source) of nervous disease of women, has demonstrated beyond doubt, that the most prolific source of nervousness in women is unnatural sexual living.

Many women become neurasthenics (nervous wrecks) from masturbation (self-abuse), more from incomplete intercourse, i. e., sexual congress without attaining the crisis.

Habitual nervousness.

Both groups are apt to become dissatisfied with life, habitual nervousness, irritation and lack of self-control may be ascribed as the cause in many cases, Young women who complain of chronic backache, headache, neuralgia of the ilio-hypogastric nerve (often erroneously diagnosed as ovaritis (inflammation of the ovaries), or ovarian neuralgia, with prostration, inability to study or concentrate the mind, or to work because of fatigue on slight exertion), when in reality, those symptoms are due to masturbation or other abnormal sexual life. Many women have the habit of irritating their organ or otherwise carrying themselves almost to the culmination, the crisis, and then "letting down," repeating the act time and time again in the belief that they are doing no harm, unless the crisis, the climax of the sexual act is produced.

Women suffering from leucorrhea, "the whites," anemia, "a deficient quantity or quality of blood," chronic invalids, cranky maids, dissatisfied, etc., many cases may be ascribed to this practice.

Many women erroneously believe they will not become pregnant unless they "go off," therefore for months and

years they permit themselves to be carried to the height of sexual excitement without getting gratification.

Others there are, married as well as unmarried, who have their organ irritated either by themselves or some other person, until they nearly reach the climax, and then permit the excitement to subside for a few minutes, then repeating the act just to the verge of explosion, continuing this until finally sinking into slumber.

These become the worst nervous wrecks; often incurable perverts.

Others again, owe the origin of their trouble to attempts at prevention of conception; mainly to "withdrawal of the male organ," which is the leading cause of sexual nervousness or nervous prostration of both sexes. Cases which do not yield to treatment after marriage, are usually those, in which the girl becomes so addicted to self pollution that she will continue after marriage. And these are the women who declare marriage to be a failure.

Treatment. The treatment of these consist: first of all in the correction of abnormal practice, by inducing physiologic "natural" condition, either through stimulating functional activity, relieving excitement or over activity.

Medicines in these cases can only act as adjuvants—"assistant" remedies.

See chapters on Sex Congress, Sex Habits, Sex Discipline, Self-Abuse.

CHAPTER LXVIII.

Neurasthenia

Nervous prostration.

IS A CONDITION of exhaustion of the nervous system. This is a functional disease characterized by a lack of nervous energy and increased sensitiveness to external impressions. The causes are much the same as those that give rise to hysteria. Men are often affected. Overwork, prolonged mental strain and depressing emotions are common exciting causes.

Treatment.

The treatment is hygienic and dietetic; regular physical exercise will be of value; temporary change of occupation or environments may be all that is needed. While on the other hand, the weak and anemic require rest. In all cases careful attention must be given to the diet, bathing and clothing; and the patient assured that he is not suffering from an incurable complaint; frequent bathing with salt-water, followed by friction (rubbing) of the skin, will often add to the general vigor.

Tobacco and alcohol must be interdicted, coffee and tea used very sparingly.

Medication should consist of tonics to build up the general system and are of undoubted benefit in most cases; but should be at the direction of a competent physician.

See chapter on "The Nervous Woman."

CHAPTER LXIX.

Acute Chorea.

St. Vitus dance.

THIS nervous affection occurs especially in children and is characterized by irregular, spasmodic movements that increase under excitement and cease during sleep. The majority of

cases occur in children between the ages of five and fifteen years, though adults especially women during or after pregnancy are occasionally attacked. More females are affected than males. Children of nervous temperament are especially susceptible. Fright, anxiety, overstrain at school, with confinement, are exciting causes for those predisposed. In about one-fifth of all cases there is an antecedent history of rheumatism, between which disease and chorea there appears to be some relation. Chorea is not common in spring months. Toxic conditions due to indigestion, constipation, or anything that lowers the vitality may be included as exciting causes.

Treatment.

Treatment—Rest of body and mind is an essential element. The child should be taken from school and placed under most favorable conditions. Amusements in the open air when the weather permits, the diet and bowels must have attention.

A child not properly attended to, chorea may terminate in epilepsy; but with persistent and early attention to the rules given by the family physician, the sufferer will outgrow the malady.

CHAPTER LXX.

MELANCHOLIA.

Mental depression.

A CHARACTERISTIC of the disease is a profound mental disturbance varying from simple depression to the most violent despair.

It develops slowly and progressively as a result of disturbance of the physical and mental state; such as prolonged mental emotions, which impair the strength of the nervous system. General disorders of nutrition, the result of stomach and intestinal affections, severe loss of blood, as after birth, lactation, etc., brooding over illness;

looking into space with some has a bad effect; sleeplessness and restless nights; depression on account of some real or imaginary wrong or sorrow.

Cause and treatment — prevention.

The treatment should begin early by the others of the family; try to dispel all sorts of wrong and despondency whenever it may make its appearance—here is where the work of prevention is the most valuable of all.

Then by removing the cause if possible; assist them to cheer up and divert their attention to pleasant surroundings; see that they sleep well and eat proper food.

Members of the family can do much to prevent.

It should be the aim of the members of the family to make things cheerful and hopeful for her, and banish from conversation subjects that are dismal and depressing. Tell the person that there is no use to worry, that worry or thinking about such things will do no good but do harm to health.

Cheerful company helpful.

Let the company, if any, be cheerful. Gossips should be banished; stories that worry should not be told in their presence. Everything that cheers the mind tends to benefit these patients—ragtime music, etc., may be helpful.

Suggestive treatment should convey to the patient's mind the suggestion of cure. It is the mind we are to treat in these cases.

The food is an important matter; the patient should receive sufficient quantity of light, highly nutritious and easily digestible food. *Home treatment* might almost be laid down as an axiom that there should be no such thing as home treatment of the insane.

And when a case has progressed to that extent the patient should be taken to a Sanitarium well equipped for such cases, to quiet quarters, and there nursed and tended back to health.

CHAPTER LXXI.

Cancer of the Female Organs and of the Skin.

Cancer in women. WE SHALL devote a short chapter to this, one of the most dreaded diseases so prone to these parts; and wish to direct attention to the fact that the majority of the cancerous conditions of these parts are preventable, and curable if taken in hand early, and that the treatment is not by operation and seldom by cauterization (burning), but by proper medical local treatment. The time was, and that not many years ago, when prompt operation was the only treatment advocated, as offering hope for cure or reasonable assurance to extend life. This in certain cases still holds good—and these are where cancer begins by a circumscribed tumor—where it can be excised as a whole, leaving no nest of cells to recur, but those are comparatively rare. The majority of cancers in these regions begin in the mucous membrane of the neck of the womb, the vagina and the vulva; and usually with small indurations, tenderness, sores and ulcerations of various nature.

Early recognition of great importance. When in this condition they are seldom recognized as cancerous, and not until they begin to spread and present more serious symptoms. *It is at the beginning* of the soreness that they should receive proper treatment. Women, as a rule, try to treat themselves with home remedies; they hesitate to go to a physician because they dread an examination—and therein exists the greatest danger. After the malady has once advanced, it is much more difficult to treat.

It is wonderful how much can be done for such cases even in somewhat advanced stages.

Early treatment of much importance.

We shall refrain from giving a line of treatment for the laity, as each case must be treated according to its peculiar condition and should not be undertaken by the laity, except in so far, as to follow the instructions of the physician in charge. Women who notice any signs that might be cancerous-ulcerations, persistent nodular swelling, ulceration, etc., should lose no time to be examined by one who understands and successfully treats such cases.

Many cases seemingly serious can be cured by a few treatments—but there are those which are apparently trifling and if neglected may become serious and beyond human aid.

Cause and symptoms of cancer.

Cancer begins as a small local growth, which can often be entirely cured by competent treatment; it is not a constitutional or "blood" disease; it is not a hereditary disease; there should be no thought of disgrace about it.

Cancer is not a communicable disease. It is not possible to "catch" cancer from one who has the disease.

The beginning of cancer is usually painless; for this reason its insidious onset is frequently overlooked, and is too easily neglected. Other signals must be recognized and competent medical advice obtained at once.

Cancer of the breast.

Every lump in the breast is a warning sign. But not all such lumps are cancers; innocent tumors, however, may turn into cancer if neglected; at first such tumors may be treated locally (not by massage), but by internal and external medicines which tend to stop the growth, or reduce congestion. Of late much is expected from Thyroid extract, and according to location and sex, from Mamary substance, from Supravenal, ovarion, orchiic substances, etc.

But all such treatment must be relegated to competent physicians.

Cancer of the Liver. This is a chronic disease characterized by abnormal multiplication of tissue-elements, and more or less extensive going backward changes of the liver-cells.

Cancer of the liver is more common in men than women.

The most important varieties are atrophic or portal cirrhosis, capsular cirrhosis, and syphilitic cirrhosis.

The chief causes of atrophic cirrhosis is the continual use of alcohol, especially in the form of raw spirits.

Capsular cirrhosis, is characterized by the enormous thickening of the capsule of the liver.

The symptoms closely resemble those of atrophic cirrhosis, but the course is extremely slow, the acitosis (dropsy) returning again and again after tapping.

In many cases capsulitis of the spleen, chronic pleurisy, and chronic obliterative pericarditis are also present, constituting the disorder known as multible serositis.

Syphilis may also cause this type of cirrhosis.

It is possible that some cases owe their origin to specific fevers; much worry, anger, etc., is not to be forgotten as an agrevation liver disorders.

Complications of the heart, kidneys, blood-vessels, and chronic peritonitis, are often coincidently involved in the cirrhotic process.

Prognosis. The outloog for permanent relief is bad.

Treatment. In the main, the treatment naturally, must be relegated to the physician.

If the cause or the irritant is ascertained, that should, if possible, be corrected.

The various forms or varieties of cancer being due

to abnormal proliferation of weak or fungus tissue-elements, may in many cases be corrected and life made more comfortable, if not altogether assisted to its normalcy, if the proper remedies are administered.

Surgical Treatment.

Operation is seldom indicated; except in cases where tapping is necessary.

A diet of bland, readily digested and nourishing food is indicated.

Proper elimination is of first importance; but strong or drastic medicines should be avoided.

Mild laxatives, among them the salines are the ideal eliminants, and of these Epsom salts ½ to 1 oz., taken before breakfast and supper in one or two glasses of hot water is one of the best; or, the combination of Epsom salts 8 oz., Sodium sulphate 8 oz., Sodium chloride ½ oz., Sodium bicarbonate ½ oz., dissolve in one gallon water, makes one of the best Saline waters of this take ½ to 2 ounces in glass of hat water before breakfast and supper.

For the toxic conditions, take two 5-grain tablets of Sodium Salycilate (with wintergreen), three times a day three hours after meals with glass hot water. These may be alternated every three days with two 1-grain pills of Calcium sulphide, in place of the above. This combination will help to reduce the proliferation of abnormal tissue cells.

Phytalacca (poke root) is another remedy that has some reputation along this line, and may be prescribed as follows:

R. Potassii acitatis oz. I, Ext. Phytolaccae fl. dram I, Aquae ps to make oz. IV. Mix, Sig. Teaspoonful three times a day in little water.

The question resolves down to—how can we starve the embryonic or cancer cells.

Electricity seems to have the quality of burning or

cauterizing the weaker and reserving the natural tissue-cells, and where that can be accomplished, whether by absorption, as through elimination of the proliferting elements, or by burning as by electricity, the proliferation is checked, and normal tissue assisted to normal function.

Sores about the lips, tongue or mouth, which do not heal readily are danger signals. They should never be burnt with a Cautary; we must lose no healthy tissue in those cases, and the knife should be used only to exterpate the whole growth that can be taken out entirely. Tumors of this kind, or sores should not be punctured nor massaged, not even for pathological specimens, because that will loosen and distribute cancer cells through the blood stream which will lodge in other parts of the body and form new cancers.

Treatment. The treatment must be by applications that will shrink the abnormal (Embreonic) tissue cells, by which the cancer cells are destroyed (killed).

One of the treatments is by the application of 95 per cent Carbolic acid, followed immediately with an application of Alcohol, then with 5 or 10 per cent Ichthyol in Glycerine, on a tampon. Alternate this with Hydrogen Dioxide, 1 to 3 water, saturate pledget cotton and apply until foam is white, then follow with Ichthyol-Glycerine tampon as above—once or twice a day. This treatment has proven to be excellent for open cancer sores, but especially in cancer of the womb and vagina.

Show this to your physician.

Cancer of the skin. Cancer of the skin of both sexes can usually be cured, if properly treated—especially in the early stages—and that should be before it has invaded the muscular structure. But even if it has invaded the muscular structures it can, if treated early, be cured.

The dry (scaly) cancer of the skin may be treated along the same line, writer has the best success with the Campho-Menthol and Campho-Oil of Wintergreen, 2 per cent of each in Olive oil or Oil of Perolatum applied two or three times a day; this never fails to cure, and leaves the skin in normal condition.

These are treatments that every physician should study—take time and see that the remedies are properly applied.

Ex-Ray in many cases is of some value; especially after surgical removal.

Surgical measures should be resorted to when the cancer can be entirely removed—and then only.

CHAPTER LXXII.

Appendicitis—Typhlitis—Perityphlitis.

Inflammation of the bowels.

APPENDICITIS is an inflammation of the appendix vermiformis, which we here treat, is the worm-shaped process of the cecum.

Typhlitis is an inflammation of the cecum—the beginning or head of the colon from which the appendix extends. Perityphlitis is an inflammation of the tissues around the cecum.

The functions of the appendix, it seems are not well known, but is undoubtely for a specific purpose. It is one of the numerous digestive and lubricating glands or ducts of the digestive tract.

This is well known to be one of the most alarming diseases that befalls the human race in our day.

Cause and alarm.

Every pain in the right side is a signal for alarm; many cases that are treated for this complaint are not appendicitis at all, but inflammation of the cecum, the ascending colon, or more of the intestinal tract due to infectious disease, or obstruction of the bowels in some form; due to neglect or inactivity of the intestinal tract.

Often the pain is due to accumulation of gas in the cecum or ascending colon. We shall not attempt to enumerate the varieties of appendicitis, etc., that would be of little value to the laity.

Neither shall we attempt to provide a treatment, but rather means of prevention.

Symptoms.

The simple knowledge that the symptoms need immediate and direct attention is what is needed.

It is along this line that the writer expects to give the best advice to the laity. The symptoms are:

1. Sudden pain, often general, including the whole

abdomen, but most marked in the right iliac (groin) region. If the whole abdomen, it is almost sure it is not appendicitis, but inflammation of the bowels, the same is true when the pain is periodical in which case it is due to accumulation of gas in the bowels, due to obstruction—this by feces caused by constipation or a catarrhal condition of the bowels, etc.

Pain in the right side.

2. Tenderness over the right iliac region, greatest at a point midway on a line between the umbilicus and the iliac spine (spine of the hip bone).

This pain however may be in the cecum and ascending colon—still not appendicitis or no more so than colitis; which most frequently is the case, because inflammation of the appendix is mostly a continuation of inflammation of the cecum.

3. Fever, localized, localized rigidity in the right iliac fossa (groin) or the presence of a definite tumor. This also may not be appendicitis per se, because an impacted cecum, or impacted ascending colon may present a tumor of that bowel due to impaction with accumulated feces, or it may be an abscess of the appendix.

Nausea and vomiting, constipation or diarrhea.

4. Nausea, vomiting and constipation, but may have diarrhea. The diarrhea may be due to medicines that have been taken, and it may be due to infectious disease, such as typhoid fever. If the symptoms above enumerated are due to obstruction of the bowels, then the diarrhea is from the lower bowels. The main symptom then is the excruciating pains in any part of the abdomen mostly in the right side, because the gas cannot escape on account of the closure of the lumen of the bowels. Hence, the patient discharges no or hardly any gas (wind) after the diarrhea stops.

This condition often deceives the patient and the physician—thinking the patient's bowels are open and so neglects that part of the bowels.

Patient must be watched.

This gives rise to the thought that the patient must be watched until the gas passes freely through the rectum for days or even weeks after the impaction has been relieved; because if the bowels are not thoroughly freed from the old (often sticky) accumulations, they are apt to reform into boluses and so occlude the bowel again; hence, a recurrence of the same trouble.

This occurs more often in male than in female. Is more frequent between the age of fifteenth and thirtieth years, but may occur at any age, especially during infancy and childhood.

The cause of these symptoms may be due to exposure to cold, errors in diet, intestinal catarrh, external injury, may be a cause.

It may follow infectious diseases, such as typhoid fever, influenza, and impaction of the bowels, but constipation may be regarded as the chief cause of all the symptoms, and of the disease itself.

Cause of appendicitis.

Appendicitis may be caused by the lodgement in the appendix of the fecal concretions or foreign bodies that find lodging in it, but this is of rare occurrence. Tuberculosis and infection from the bowels but constipation in this as well as inflammation of the bowels may be regarded as the chief cause—the inflammation of the appendix being an extension of the disease from the cecum.

Treatment.

The treatment consists first of all—prompt evacuation of the bowels, and the whole intestinal canal. If the infection and inflammation is of a simple character.

Medical is the logical treatment.

Medical treatment is the logical treatment, and when instructions are properly carried out the patient most invariably gets well and there is no recurrence.

It is obvious that the same neglect or cause that

brought on the first obstruction or infection, will cause the same trouble again.

And by the way, typhlitis and appendicitis are most invariably co-existing—and the relief of the typhlitis when taken in time will most always relieve the appendicitis.

When the appendix has been removed and the bowels are neglected, that is what the patient will get, of course he cannot have appendicitis when he has no appendix, but he can have typhlitis and colitis (inflammation of the cecum and of the colon) as before, and that in 99 cases out of a 100 he will have before he has inflammation of the appendix, that is the reason those who had the appendix removed still are troubled with that same pain in the right side, due to impaction of the colon, etc., which of course was the trouble in the first place.

The first thought.

Therefore, the first thought for relief should be prompt evacuation of the bowels, hot wet stupes (15 drops of turpentine to the quart of water), wring a bath towel out of this and place over the abdomen, especially over the right groin, keep this hot with a hot water bag.

Administer an ounce of Caster oil or several large doses of Epsom salts, or other quick-acting cathartic, to clear the intestinal tract effectively. Should the patient vomit and not be able to retain the medicine, or if the medicine does not act within 3 or 4 hours, or if the pain is severe give an enema containing one ounce of Epsom salts to the quart of warm water.

Put the patient in the lateral position and elevate the hips or in the knee-chest position. The high enema is preferred. The patient should be asked to draw the water up, and retain it for a little while.

If medicine by the mouth cannot be retained then withhold everything from the mouth, and repeat the enema once every hour, keep this up for 24 or 48 hours if necessary.

No food when.

The patient should be given no food for at least 24 hours after the bowels seem to be clear, and then only of the most easily assimilated fluid diet in small quantities for several days. No milk should be drunk during this time, because milk during this time forms cheesy curds and reobstructs the bowels, especially in infants and children. Barley water for infants, broth, etc., for children and adults are the ideal foods at this time. Should milk be wanted for children or adults (after the first days), then it may be mixed with cereals (mush of some kind), but the patient should not be permitted to drink milk.

Pain due to gas and its relief.

The pain is usually due to gas in the intestines and will be relieved as soon as the bowels are emptied from below up to where the accumulation of gas is. If the pain is too severe it may be relieved and the spasms relaxed by means of antispasmodic medicines, best under the direction of the family physician, but should be avoided when possible.

The temperature (fever), is controlled by the hot water enemas in which an ounce of Epsom salts and a heaping teaspoonful of bicarbonate of soda (common baking soda) to the quart of water is dissolved and the patient asked to retain it in the rectum for several hours if he can.

A compress wrung out of a solution of one ounce of Epsom salts to the quart of hot water applied over the abdomen will also help to reduce temperature, congestion, and spasm. Suffice it to say here, that when relief is not forthcoming within a reasonable time after the means here set forth call in the family physician.

The measures set forth here are preliminaries to any treatment the physician may undertake, and will serve as primary treatment, no matter what may be necessary to be done for the patient afterwards.

Much of the gas may be relieved by adding 5 to 15

drops of spirits of turpentine to a dose of Castor oil.

Recurrence not due to the appendix.

Recurrences are, as in other cases of disease. Whatever produced the disease before will do it again; in this case the disease is primarily due to inaction, constipation, overeating, colds, catarrh, etc., as was the first cause, and through neglect these, with their symptoms, are apt to recur and through the same causes as in the first place.

The removal of the appendix will not prevent these recurrences, because the appendix was never a cause, but rather the presence of these diseases in the neighbor-structures extending to the appendix, just as is the case with other glands of the body. The over-distended or impacted cecum forces foreign matter into the appendix, or prevents the appendix to eliminate its regular products into the cecum, as its natural function, just as do other glands. For example, the glands of the neck, the mastoids, and those under the tongue, which furnish the saliva, when one takes cold and through that close the lumen, the mouth of discharge, the gland swells, the pressure of the structure causes fever by choking and decomposing the contents, which form toxines, fever, swelling, abscess, pain, etc.

So with the appendix—therefore, we must treat to assist nature by eliminating the obstruction. If done in time the trouble is relieved, the gland and neighboring-structures again function and the organs do their natural work. This should be the aim of treatment.

Warning.

In urgent cases do not take the patient to the Hospital before emptying the lower bowel with an enema of warm water, over-distention may cause death before the Hospital can be reached; this has taken place in many cases. Operation is counter-indicated in the acute stage, and later it will most likely be found unnecessary.

Fever, Inflammation of the bowels.

Should there be fever, or danger of recurring, occlution of the intestinal canal, then administer the following solution per rectum:

R. Epsom salts, ½ ounce, Sodium bicarbonate, ⅛ ounce, Sodium chloride (common salt), ⅛ ounce, in pint warm water. Inject in the Rectum; if this cannot be retained, then wait ½ or 1 hour and repeat; this is to be retained until the bowels move.

This will not only reduce the fever, but will assist elimination of the intestinal contents, and will reduce inflammatory conditions of the other parts of the body. This is an excellent remedy for peritonitis, etc., and may be repeated often as seems necessary.

Fresh Air.

Fresh air does not mean that one must be in the open, nor that all the windows be open, neither that the wind strike the patient. The air in the room is fresh when the atmosphere of the room is constantly changed, so that there is no impure or stagnant air in the room.

Ventilation of the room.

Ventilation of the sick room does not mean that the wind must blow through the room, nor that there must be more than one window open. Proper ventilation of the sick room may be had by opening all or part of one window or transom, to allow the air of the room to escape; this should be much as possible opposite from where the wind comes—if from the north, then open the south window, etc., that prevents the wind striking the patient and does not create a draught. In most cases there are enough crevices about the doors and windows to permit fresh air to be drawn into the room. And at stated times the patient may be protected with careful covering to allow a general airing of the room for a half or one hour, with care that the patient will not be chilled.

CHAPTER LXXIII.

Small-Pox.

(Latest and Most Proficient Treatment—Written Especially for the Laity.)

SMALL-POX *patients,* as a rule, are left to be treated by their people, or if in the hospital by nurses. From the physician receiving mostly "distant" treatment.

Instruction on treatment by nurses and laity.

The object of this chapter is to place in the hands of the laity and if you will—in the hands of the medical profession, a more definite and safe treatment of small-pox patients, and preventative of its spread.

A treatment which will shorten the course of the disease, prevent pitting and itching, as well as much of its contagiousness. The suffering in every particular and the death rate being much reduced.

The foregoing is much to claim, but not more than is obtained when this system of treatment is applied to this mal-odorous disease.

Small-pox is one of the most highly contagious, infectious and dangerous diseases to which humanity is liable. And before the protective power of vaccination was known, small-pox caused one-tenth of all deaths of the human race, and one-third of all deaths under ten years of age. The great change in the character of this disease, during the past century is due to the influence of vaccination.

The specific germs of infection of small-pox develop during the course of the disease in the eruptive stage. The contagion of this disease may be communicated from one person to another by contact, or it may be carried

through the air of the room (by the flying dust in which the germs are carried), or from place to place, by means of infected clothing, bedding, merchandise, letters, papers, etc., or by any article which may have become infected by small-pox germs.

One attack confers immunity as a rule.

One attack of small-pox usually confers immunity upon the person so afflicted from a second attack; but this is not invariably true.

Small-pox is perhaps of all contagious diseases the easiest to control, provided it is promptly recognized and properly cared for.

Mild cases of small-pox impart just as much virulence as those more seriously attacked, and should be treated with as much attention and concern as the most severe cases—at least in so far as its contagiousness is concerned. The reason why small-pox is so much dreaded, is because of its after-effects, pock marks and personal disfigurement, and a general run-down constitution may result.

After effects.

Blindness, deafness, a tendency to tuberculosis, etc., are among the consequences of the disease.

Mustard plaster not to be used.

There should be no mustard plaster applied to relieve backache. The irritation to the skin thus produced frequently leads to confluence of the eruption over this area, which is very painful and annoying to the patient, and the plaster gives little or no relief.

Treatment is preventative.

Treatment—The preventative measures are of first importance; these include vaccination, complete isolation of the patient (preferably in a special hospital) the thorough disinfection of the objects that have been in contact with the patient, vaccination of all who have been or who are likely to be exposed to the contagious disease.

Ulcers to be kept anointed.

Keep the papules (pimples) and ulcers constantly saturated with an antiseptic ointment, including the surface of the whole body and the nostrils.

The mouth may be swabbed or rinsed every two or three hours with a boric acid or listerine solution.

Disinfect bed, vessel, etc.

Disinfect all excretions from the bowels, kidneys, nose and mouth, as well as discharges from ulcers and sores. The vessel should always contain some water (about one quart) in which some chlorate of lime, or a teaspoonful of formaldehyde, creoline, or other disinfectant prescribed by the attending physician has been added—so as to be ready for use by the patient at any time.

Also the spittoon.

The spittoon should be treated in like manner; better still if the patient use a cloth to spit on, which then should be burnt.

Treatment of the Attack.

The attack.

During the initial stage of small-pox the treatment is symptomatic, and has for its purpose the alleviation of the distress of the patient.

When the diagnosis has been made the patient should be isolated and placed in a comfortable bed in a well ventilated room. The temperature of the room should be regular—at about 70 degrees F.

Care of the bowels.

The bowels of the patient are of the first consideration and should have from one to three free movements each day. The best laxative at this stage, in fact, during the whole period of the disease are the salines. Dose ½ to 2 teaspoonfuls.

This may consist of equal parts of Epsom salts and sodium sulphate in a glass of hot water, one to three times a day half hour before the meals until there is lit-

tle or no fever, and the bowels kept freely open. This is one of the best and safest remedies to alleviate the fever and will antisepticize the bowels, carry off the toxines, and relieve misery, including the backache.

Medication.

A 5 grain tablet of triple sulphocarbolate three or four times a day will be of great benefit for the patient and for those who have been exposed to the disease, or must live in the same house. These should use this remedy to keep the alimentary canal antiseptic and so prevent taking the disease. The physician should however leave or provide the necessary medicine. He should provide remedies to be used in case of too great pain and restlessness.

Diet.

The diet during the eruptive stage of small-pox should consist of simple and easily digestible and nutritious foods; milk, broth and soft boiled eggs are among the best; milk however should be taken with farinaceous articles; mush of different kinds is well borne and are nutritious.

Milk not good alone.

Milk should not be drunk alone, but mixed with other foods, to avoid indigestible curds.

A bitter complaint.

One of the bitterest complaints of the patient during the early eruptive stage is the soreness in the mouth and throat from the presence of small-pox lesions. As the disease progresses the vesicles upon the mucous surfaces are converted into superficial ulcerations.

Deglutition (swallowing) gives rise to the most distressing pain and measures have to be directed towards its relief. Sometimes a simple mouth-wash containing boric acid, 15 grains to the ounce of sterile water will suffice.

Ice or cold drinks.

Ice or cold drinks of any kind should not be used. Where there is much fetor (offensive order) arising from the mouth, chlorate-water or a carbolized mouth wash will tend to correct it.

Swelling of the face.

The swelling of the face, eyes, and glands of the neck should be relieved with hot stupes; to these may be added one-half ounce Epsom salts to the quart of hot water—a bath towel wrung out of this and applied to the face for a half hour at a time. Keep the water hot by placing the container on a low fire, and when through should be followed with a dry hot towel until it cools off; this will be pleasant relief.

Never use ice or cold applications to the face, head or neck without direct instructions from the physician; cold is not well borne by small-pox patients; moist heat will do all that is benefited by cold, and there is no risk nor danger of injury. Hot stupes are usually the best to relieve pain, swelling, and fever during this stage of the disease.

Prevent pitting.

During the eruptive stage the papules or pimples should be anointed with an antiseptic ointment and kept oily during the whole period of eruption and until every sign of scaling has disappeared.

Also the whole body should be anointed with the same ointment once or twice a day—this need only be to the extent of a slight coating, but to every part of the body's external surface—including the external part of the anus, etc. This will serve much to prevent contagion, killing the germs in the exudate from the skin that otherwise contain live germs ready to infect clothing and other things that come in contact with the patient; and scales falling on the floor infect the dust, etc.

The hair of the head.

The hair of the head, the scalp, the eruption on the scalp should be kept oily with the same ointment. This can be done by the patient with the tips of his fingers rubbing it into each pimple or papule as they appear, and repeating the same every four to six hours especially during the latter period—the time of exudation, during this time

the exudate forms little crystals, these if let alone will form crusts, etc., little particles of the dry crusts falling off are deposited on clothing, floor, etc., mixing with the sweepings and so become a means of infection. But, if treated as suggested, they will be saturated with the antiseptic ointment and rubbed with the tips of the fingers and not allowed to form crusts; the pustules or little ulcers are thus covered and saturated with the ointment and the excretions sterilized as it exudes, and is made harmless.

Prevent formation of crusts.

There will be no formation of crusts under which an accumulation of pus may form and cause pitting, or at most cause a bluish mark which requires weeks or months to be removed by involution or scaling off. The so anointed surfaces may be wiped off with a soft cloth several times a day; such cloths are to be put into the fire and burned.

If any of the surface of the body is washed, or if a bath is administered to the patient during the period of eruption or desquamation, the parts so washed or bathed should again receive a thin coat of the ointment. This will cause the surface of the body to be sterile, and practically incapable of infecting any thing with the germs of small-pox because the germs have been killed.

Keep the surface sterile.

If treated in this way there will be no dried pulverized scales to be distributed through the room and attached to the clothing, bedding and furniture. Nearly all, if not all of the granulated exudate that does fall off or is wiped off is sterile, and then the disease cannot be communicated to others.

Safeguards.

Notwithstanding these safeguards, the general rules laid down to prevent the spread of the disease should be carried out, because some of the exudate and discharges might not have been saturated with the antiseptic ointment, and so spread live or virile germs.

Kind of ointment needed.

Nearly any kind of antiseptic ointment is of benefit; the physician knows what to prescribe; what is needed is an ointment which is easily spread, not sticky to the hair, will kill the germs; soothe diseased parts without smarting or hurting the patient, and be sure there will be no constitutional or local harm to the patient.

The following is a most proficient and safe prescription for an ointment to answer the purpose:

Naphthalene 15 grains, venice turpentine one-half ounce, vaseline enough to make two ounces. Rub the naphthalene to a fine powder then gradually rub this into the venice turpentine and finally rub this into the vaseline until well mixed. Lard may be substituted for vaseline. Ten drops each of oil of wintergreen and oil of cinnamon may be added to give the ointment a better flavor; if anything, this will improve the quality.

Open the vesicles.

When the vesicles are fully formed they may be opened and the contents evacuted. This is especially advisable when there is much pain as is usually the case with those on the hands, fingers and soles of the feet, where the skin is thick; if this is done the pain will at once be relieved, and there will be no crusts or scabs if anointed as suggested.

A sharp, pointed knife or sharp pointed manicure scissors in the hands of the laity are of the most convenient instruments for opening the vesicles without pain. Do not use a needle or pin. Enter the vesicle with the point of the instrument at one side into the pusfilled space, lift the point of the knife through the top of the vesicle, then soak up the exudate with a pledget of aseptic cotton and burn it. The vesicles so opened should be promptly saturated with the ointment after the contents has been wiped off, and as the granulation afterwards forms, anoint again, then there will be no hard crusts or scabs under which pus would form and eat into the skin to form pits.

THE SICK-ROOM.

The house in which the patient remains for the time being becomes a small-pox hospital or isolation hospital. The room selected for the sick person should be large and well ventilated, and as far from the living room of other members of the household as it is practicable to have it. Whenever possible a room on the second floor of the house should be selected. Before removing the sick person to the room which he is to occupy all ornaments, carpets, hangings and other articles not absolutely needed in the room should be removed.

Rooms of other members.

If possible, the floor of the room should be oiled or painted or covered with good oil cloth (provided there is no bad odor from it). Free circulation of air from without should be admitted both night and day, but it must be of comfortable temperature not less than 70 degrees F.

Temperature of the room.

The bed should be placed if possible in the middle of the room, but out of draught. The door connecting with halls or other rooms should be covered with sheet or cloth kept wet with an antiseptic solution, camphenol eight tablespoonfuls to the pail of water or with some other disinfectant solution. The sheet should not be tacked on the lock side of frame but left open to be pushed aside. The sheet should be long enough to allow ten or twelve inches to lie on the floor, and kept wet with an antiseptic solution.

A narrow iron bedstead or cot is the most suitable. The mattress on which the patient takes sick may be used. To prevent saturation of the mattress with the discharges of the patient, which sometimes occurs, may be covered with a water-proof fabric such as linite, etc. If there is a fire-place, have a fire in it, even if you must have other heat. If a stove must be used a tin or kettle of water should be put on it.

Dust and dirt. Dust and dirt should be wiped up with cloths dampened with an antiseptic solution; sweeping and dusting are objectionable and dangerous. These cloths should at once be thrown into an antiseptic solution or into the fire. Books, toys, and articles used to amuse the patient when convalescent should be burned within the room.

Under no circumstances should articles borrowed be returned to be used by the well. No inmate of the house, during the continuance of the disease, nor after its termination should be allowed to leave until permission is given by the health authorities.

Letters should not be allowed to be sent from the patient and all mail matter from inmates of the house must before being sent out be subjected to the heat of an oven or other equal method of disinfection.

Domestic animals, dogs, cats, etc., if they have come in contact with the patient should be immediately killed and buried.

No patient should leave the house until all the scaling of the skin has ceased and the skin is perfectly smooth. This point should be established by the health authorities or attending physician. For several days before his discharge the patient should take a bath daily with antiseptic soap, and anoint with vaseline or similar substance.

Disinfect excretion. If, however, the patient has been treated with an antiseptic ointment as directed in the foregoing instructions, and has during the period of convalescence occasionally used the same ointment, there need be no fear of contagion. During the entire sickness, the privy, cesspools, urinals, sinks, drains, etc., should be well flushed with an antiseptic solution. Insanitary surroundings tend to retard the recovery of the patient, and spread the disease. Rubbish and decaying matter in the cellar should be gathered into a heap and sprinkled with an antiseptic

solution, and at the first opportunity all rubbish and decaying matter should be burned.

Pools of water in the cellar or about the yard should be drained or filled.

During the progress of any contagious disease the rooms other than those used by the sick should occasionally be disinfected, in order to prevent the spread of infection and to destroy odors.

Deodorized fumigation.

This may be accomplished by using Lister's Fumigators for this purpose. To deodorize the sick-room or living room, one Lister's Fumigator in a room or building will be quite sufficient. In such cases it is not necessary to close windows or doors, although more efficient work will be done if this precaution is observed. Windows and other vents may be opened as soon as the candle is burned out. This procedure will destroy odors arising from the sick-room or crowded quarters, obnoxious vapors, dampness, mould, etc. In the sick-room Casino Pastils may be used from time to time.

Casino Pastils are a fumigator especially devised for burning in the room where there is sickness. Upon being lighted they give off a mild aromatic vapor very pleasant to smell, and very effective as a deodorizer.

If used in the sick-room say as often as once a day, Casino Pastils will be found to do away with the objectable body odor always noticed there, and to keep the room sweet.

The small-pox nurse.

Suggestions to small-pox nurses: Particular care should be given to the disinfection of the person. Daily baths should be taken. A soap known as Synol soap, or another as designated surgeons' Creosol soap, or even Castile soap will do for this bath.

The nurse should as much as possible avoid sitting down in the sick-room, especially avoid sitting upon the bed or even leaning against the bed, walls or furniture.

Wash the hands with Creosol soap after contact with the patient. Do not put to your lips any food, drink, dish or utensil that the patient has touched or that has been in the sick-room, before it has been washed and disinfected.

Do not go into the sick-room with an empty stomach, even a drink of water, especially hot water will serve in case of emergency.

Do not eat or drink in the sick-room. Keep the hands free from all discharges from the sick. If the hands are accidentally contaminated wash them as soon as possible with antiseptic soap.

If the hands are scratched or cut, put court plaster or adhesive plaster over the wounds. Never touch the sick with sore or scratched hands.

Keep the room at a temperature of 70 or 72 degrees F. Keep the room well aired, yet keep it at as even temperature as possible.

Let the direct sunlight in as much as possible, unless it seems to hurt the patient's eyes. If the patient's eyes are affected by the sunlight paste red paper over the glass or paint them with red paint. When so treated, the light will be very beneficial. Bedding should be changed frequently. Throw the soiled bed clothes into a tub or pail containing a solution of camphenol (one teaspoonful to a quart of water) before removing them from the room. In taking the soiled bedding from the room to be washed, wrap it in a sheet dampened with this same solution.

Towels, napkins or bandages should always be clean. They may be used more than once if they are taken from the room and disinfected every time.

Dishes, towels, etc.

Dishes, cups, glasses, spoons and utensils, which have been used in the sick-room, should be disinfected before being taken from the room. Scalding hot water containing from two to four tablespoonfuls of camphenol to a quart of water should be used.

Any articles such as shears, combs, brushes, toys or anything handled by or that has come in contact with the patient, should likewise be disinfected before being removed from the room.

It is a safe rule to consider that everything carried into the sick-room has become infected and needs disinfecting before being carried out and used elsewhere.

Dishes which the patient uses should not be used by others, nor washed with the other dishes.

Food. The food should be brought into the room just before the patient is ready for it. And articles of food left over should be burned, or mixed with an antiseptic solution and burned.

Milk or other food must not be allowed to stand in the sick-room, and whatever food or drink has been in the room must not be used by others or fed to dogs or cats. Excreta from the bowels or kidneys should be immediately covered with a solution of the disinfectant.

Vessels containing the discharges and disinfectants should be shaken or otherwise stirred, and after a half hour may be thrown into the sewer or buried in the ground. Discharges should never be thrown where they might contaminate a running steam; and not be buried near a well or stream. Vessels used to catch discharges should be thoroughly disinfected with boiling water containing a strong disinfectant. The nurse should exercise regularly if possible in the open air.

The nurse should be given as much sleep as usual. If the patient needs constant care, another attendant should be procured if possible. The nurse should wear a washable uniform, a washable cap should cover the hair.

DISINFECTION OF ROOM AFTER THE RECOVERY OR DEATH OF THE PATIENT.

Disinfection of room. The first thing to do is to close the windows and doors. The furniture should be removed from the walls, cup-

boards, drawers and closets should be opened; all clothing, clothes and rugs should be hung upon clothes horses or clothes-lines in the middle of the room, each article separated and unfolded, pockets should be turned inside out. Books that were exposed or handled had best be burned or otherwise open to the fullest possible extent. Everything in the shape of rags, cloths or letters should be gathered in paper or other bags and sprinkled with a solution of disinfectant and then burned. In removing any article from the room for destruction or otherwise, it should first be sprinkled with an antiseptic solution. Everything within the room should be so placed and opened out that the gaseous disinfectant employed will penetrate therein.

Cracks of windows and doors should be stuffed with cloths wet in an antiseptic solution or pasted over with paper. This can be done by cutting heavy newspaper in strips, wet them and paste over cracks.

Fumigation. The disinfecting agents now mostly employed are sulphur and formaldehyde, either can be had at the drug stores or supply houses. Probably the most convenient and best forms of apparatus are Johnson's Sulphur Fumigators and Lister's Formaldehyde Fumigators.

In using these fumigators after the room to be fumigated has been closed, as suggested in the foregoing, the fumigators should be placed about the room on metal or other plates (pie plates may be used) with some water in them, the fumigators then should be lighted and the outer door then duly closed and sealed by stuffing or pasting the cracks. And remain sealed for twelve or twenty hours.

Ordinarily one fumigator is sufficient for an ordinary-sized room, but in the room which has been occupied by a small-pox patient more than one fumigator should be used, for a room ten by twelve or fourteen feet and ten feet high three or four fumigating candles should be

burned. The foregoing is intended for those who must take upon themselves the task of fumigating their premises. In localities where there is a health department having charge of these cases, the fumigation is best left in their hands.

THE DEAD FROM SMALL-POX.

In the event of death the health authorities should be consulted and the body wrapped as required by law. If no such law exists the body should be wrapped in a sheet or blanket, soaked in a solution of camphenol, eight tablespoonfuls to a quart of water, or an equivalent disinfectant, then placed in an air-tight coffin which must remain in the sick-room until removed for burial. Public funerals, wakes, etc., over such bodies are forbidden by law, and in absence of a specific law, should never be permitted. The coffin must not be opened nor the remains exposed under any pretext whatever. It is a violation of the law in most of the states, subject to heavy penalties to remove such a body from the limits of the city or village where death occurs. The body of the person who died of small-pox may only be transported to a local cemetery, and should be buried at least six feet below the surface of the ground and not removed within ten years after burial.

CHAPTER LXXIV.

COW'S MILK AS FOOD FOR INFANTS AND INVALIDS, RAW AND HEATED.

ON THE whole, infant feeding, in spite of the fact that it seems to be swayed by "fads and fancies," is becoming much more rational, due to the fact that the teaching is now founded upon the basic principle

of nutrition. The tendency is toward simplified feeding, the use of whole instead of top milk, and the use of skimmed milk rather than opposite type, a super-fat milk. Caloric feeding has found its place and a useful one, that is as a check on any modification made to insure the proper number of calorics per kilogram of body weight. The admixture of extract of malt or dextri-maltose, barley-water, etc., as now practiced, has practically placed a boon on child feeding.

Malt extract replacing milk sugar and granulated sugar, especially in cases in which there is sugar intolerance. Its advantages are: its ready absorption, a higher percentage can be given without producing sugar indigestion and its weight-producing quality.

Barley water— Barley-water, oatmeal-water, etc., are used in place of pure water as modifiers, and as additional food in a measure to prevent hard or tough curds.

Eiweiss. The Flinkenstein and Meyer Modification of milk (Eiweiss milk) as variously known, which has aroused wide interest, has not proven to be the panacea which earlier reports led us to believe.

This method depends upon the extraction of the casein to which buttermilk is added. It is however indicated in intestinal disorders, and especially in those in which the gas bacillus predominate. The consensus of opinion seems that Eiweiss (white of egg) milk is of value because of its low fat, high protein and maltose qualities.

The question as to what type of milk is the most suitable for feeding, is now not so much in dispute as in former years.

The chief objections to heating milk are that it promotes carelessness and discourages efforts to produce clean milk. But it should be born in mind that heating the milk is not to take the place of inspection and improvements in dairy methods; although it is quite a

fortification to dirt and other careless methods that may take place in handling milk.

The larger dairies must depend much upon hired help and they are not always reliable even if the owner himself is. As to the effect of boiled milk on nutritional conditions there is some dispute.

Much has been said as regards the relation of boiled milk to scurvy and rickets. In Germany and France heated milk is used nearly exclusively in artificial feeding of children without the production of either rickets or scurvy.

Roseman has said that the "evidence seems clear that these two diseases bear no relation to the proper heating of milk." In favor of heated milk is the fact that the curds produced by rennin coagulation are softer, less tough and more flacculent than those produced by raw milk. Heated milk is more constipating because it contains fewer bacteria and is therefore less irritating than raw milk.

Heating: the only certain protection.

Heating the milk is the only certain means of protection from the organisms of diphtheria, tuberculosis, typhoid fever, foot and mouth disease, and other infectious diseases introduced into milk by carriers or through contamination in other ways in its handling from the time of milking to the time of consumption.

Certified, pasteurized and boiled milk are equally extolled by authorities. However, the weight of evidence seems preponderatingly in favor of boiled, and the pasteurized milk equal in grade to the certified.

I will briefly give the conclusions from an experiment made by Schroeder in an attempt to compare raw, pasteurized and sterilized milk with breast milk. New born guinea pigs were used for the purpose, only the hardy ones being put upon the artificial product. They were kept under observation for more than a year, as a matter of fact through the second generation. The difference in

the value of the three kinds of milk was measured in two ways, by mortality, and by the average weight at different periods of the animals that remained alive.

Death rate tested.

The death rate among those fed naturally was 14 per cent as against 46 per cent on boiled milk; 53 per cent pasteurized and 52 per cent raw milk. The enormous difference in the death rate of those fed naturally and those fed on a milk of a foreign species is very impressive. The difference between the three kinds of milk is in favor of the boiled milk. As to the weight records, the boiled milk groups is distinctly the better of the artificial foods. The naturally fed group however showed a gain of 53 grains of the heaviest of the artificially fed.

Quoting Schroeder in Part.

"Heat applied to milk is not a renovating, rejuvenating or cleansing agent. All we can expect of it is to neutralize those specific germs that find their way into milk in spite of our utmost care to exclude them. I believe those who have studied the question impartially cannot be far from the conclusion that the infants who must unfortunately be fed artificially on cow's milk, and the invalids whose diet is restricted as a whole or in part to milk, should receive properly certified milk, efficiently pasteurized, or preferably, boiled."

Infants and invalids.

It should be borne in mind that invalids (adults included), who are to be fed on milk, will do better when mixed with liquids of cereals, or in well prepared, well cooked gruels.

Milk alone is apt to form large, hard or tough curds which irritate the digestive organs, and often are not digestible, putrefy and form poisonous toxines. While when mixed with only barley-water, oatmeal-water, etc., will break up into very fine curds which do not irritate

the stomach, are easily digested, or passed on, and seldom form gas in the intestinal tract.

An apparatus to prepare modified foods for infants, known as "The Materia," a glass graduate may be obtained through any druggist, or from the manufacturer, "The Materia Company, 70 Warren Street, New York City, is the best apparatus for home modification of cow's milk, and where there is difficulty should be procured.

How to prevent milk from scorching.

Prevent milk from sticking to the vessel (scorching) by greasing the vessel with sweet lard before the milk is put in it. This is not required, when using a double vessel. (See article on Feeding the Infant.)

CHAPTER LXXV.

HIVES OR NETTLERASH (URTICARIA).

THIS is an inflammatory affection characterized by the eruption of pale-red evanescent wheels that are associated with severe itching. Due to gastro-intestinal disturbance, emotional excitement and chronic visceral (stomach and bowel) disease, are predisposing causes. Certain articles of food such as shell-fish, strawberries, cranberries, etc. Bites of certain insects produce the disease; mosquitoes, bedbugs, caterpillars, etc. Some drugs induce hives in susceptible people.

Symptoms: The eruption appears suddenly and may be limited or more or less general over the body. The lesions are firm rounded, pinkish or whitish elevations, surrounded by red areolae (wheels). They last a few hours and are succeeded by new ones in other places.

Treatment: The cause should be found and removed when possible. The stomach and bowels should be looked after. When there is constipation, saline laxatives should be given. If simple remedies do not relieve the patient the family physician should be consulted.

CHAPTER LXXVI.

Fever Blisters (Herpes Simplex).

AN ACUTE, non-contagious disease, characterized by groups of small vesicles mounted on inflammatory bases.

Fever blisters are very common in febrile diseases, colds, influenza, etc.

Symptoms: One or more clusters of small vesicles appear, usually on the mucous membranes of the face, lips, nose, etc., or the genitals. The vesicles are mounted on an inflammatory base, contain clear fluid, and show no tendency to rupture. Soon their contents become puriform (pus-like), dry up, and form reddish-brown crusts that fall off in a few days. Burning and tingling precede and accompany the eruption. In severe cases there may be much swelling of lips and nose.

Simple Treatment: Hot water stupes; a cloth wrung out of hot water; apply same over the affected area for 15 or 30 minutes at a time, repeat in one to four hours; this if applied early is a pleasant and quick relief, or the lesion may be painted with flexible collodion.

Eczema (Tetter).

Eczema is a non-contagious inflammatory disease of the skin, characterized by multiform lesions; redness of the skin, pimples, blisters, pustules, scales and crusts, associated with infiltrations, itching, and more or less discharge. It is most common in the young and the aged. It may be caused by digestive disturbances; debility, and gout predispose to its development. It may be due to external irritations, like cold, heat, certain plants, hard soap, certain dyes, etc. This is a disease of many forms

and varieties, too numerous to attempt to discuss fully in this work.

The causes and diagnosis can be studied only by one versed in disease and medicine, and for that reason we shall forego detail for its treatment. However, there are some cases which can be treated with simple remedies along the same lines indicated for ordinary skin eruptions; as a rule, eczema cannot be treated as such, but rather, the treatment depends upon the underlying cause which must be ascertained, and that requires a competent physician.

Directions for treatment therefore will here be omitted.

CHAPTER LXXVII.

DISEASES OF CHILDREN.

A prelude to this chapter.

UNDER this head we shall consider some of the principal diseases of children; especially such as pertain to the rearing of them in a way that they may become healthy adults and citizens.

We also shall endeavor to give some instruction to parents as an aid in common complaints and diseases; more especially such which they themselves can make use of.

We shall not attempt to discuss all diseases of children, but hope to be of great help by giving parents a general idea of minor ailments, and so assist them to prevent serious illness by early aids.

To be able to detect disease one must understand conditions in health.

To be able to have healthy children we must have healthy infants.

The Sick Baby.

There are a few simple rules that the mother can, and will do well to observe in caring for a sick infant or child, besides the administration of simple remedies. By doing so she will greatly aid the physician in his efforts to effect prompt relief. These rules chiefly pertain to the surroundings of the child, and the arrangements of the sick-room. The mother's tact and personal qualifications for the task of nursing will also be of the greatest assistance to the doctor.

It will do no harm for her to take a quiet peep into her own nature, the attributes that will help most are:

The nurse and self-control.

To be a good nurse, the *mother must* before *all else possess self-control.* She should never allow the child to see the seriousness of the illness reflected in her face. Cheerfulness is a quality that will help the little patient greatly to bear his suffering. If the mother is cheerful, kind and uncomplaining, she will shed around an atmosphere of hope so necessary in the sick-room.

If the disease is long or contagious, she should dress in wash clothes—only in this way can she keep herself fresh and clean. She must try to put herself away from the general worries of the house, and center her powers for the time being upon the problem of the sick-room.

Rules to be observed by the nurse.

A few rules to be observed in the sick-room may be in order as follows: Never talk depressingly; never speak of the patient's symptoms in his presence; be silent a great deal; when you speak, speak quietly, but do not whisper; whispering is apt to be taken by the patient as speaking of things he should not hear, that worries him; and we should remember that in sickness the nerves are sensitive. Always show strict obedience to the physician, and keep alive the child's faith in him.

Mothers to practice self-control.

Always try to control yourself, for your lack of self-control will quickly be communicated to the child. Never say that you see no improvement before the child, but keep up his courage.

Mothers help to physicians.

The mother can be of great help to the physician if she teaches the baby early in his life to put out his tongue to take a pill, gargle, and allow his throat and eyes to be examined.

Do not threaten the baby.

Do not threaten the baby with tales of "what the doctor will do if he does not behave." Tell the child that the doctor is his best friend, and teach him to be loyal and obedient. He must know that without his co-operation, the doctor cannot make him well. Never give your baby any form of advertised medicine. Neither is it safe to give him some concoctions prescribed by the neighbor—soothing syrups, etc., which consist usually of mixtures of some sort of opium and alcohol.

"As his health depends on feeding,
Of all rules that you are heeding;
Mothers, let this law come first,
Babies by mothers should be nursed."

THE INFANT.

To maintain the infant's health.

The first and foremost question is: How may the health of the child be maintained?

Chiefly by cleanliness, prudent feeding, warmth, well ventilated rooms and avoiding of improper medication.

CHAPTER LXXVIII.

Flatulence and Colic.

Colic in infants.

THE habitual colic in early infancy is almost invariably due to wrong feeding and taking cold, chiefly cold feet. The food is too rich or in some way does not agree with the infant, and it is in the correction of this that the treatment should aim.

Indigestion.

Curds in the stool, is due to indigestion, and from the same cause as in habitual colic, and is usually associated with it. The curds usually appear as white masses or lumps, sometimes they are gray or green, coated with mucus. *Colic, curds* in the stools, *and constipation,* are a frequent combination and are usually due to too rich foods, or inability to digest them, even though the percentage of solids is not too high. And for this reason there are times when practically all milk foods must be withdrawn,

Milk to be withdrawn when?

and the infant put on barley-water, whey, etc. Many infants do not get enough warm water to drink, parents not knowing that this is necessary. The breast-fed as well as those that are fed on artificial food, should have water between feeding several times each day. Infants should get no cold water —nothing cooler than mother's milk. Infants should receive no solid food until after they have teeth to masticate the same.

When the infant takes cold its digestion is impeded, and that causes putrefaction (souring and fermenting), instead of digestion of the food—hence, the "sour stomach," the "gas on the stomach," biliousness, etc. Cold feet is the chief cause of this trouble.

Teeth are a guide.

The teeth of the infant are the natural indicator as to when it is time to begin with eating ordinary food; only

those who so feed the infant have a right to expect healthy children.

Constipation in infants.

Constipation in infants may be remedied by feeding warm water. Barley-water, oatmeal-water, etc., may be given in place of regular food whether breast milk or artificial food is used. If it is found that the bowels have not moved by a certain time give it one or two ounces warm water by the rectum. At times it may be well to add ½ to 1 teaspoonful of glycerine; or inject tablespoonful olive oil. When the child gets strong enough to sit up, it should be placed upon an open chair under which its little chamber is placed, and this three times a day at stated times, say at six or seven o'clock in the morning, twelve or one at noon and six or seven o'clock in the evening. Its bowels should be emptied three times a day and this will help to regulate them. ½ to 1 teaspoonful of orange juice with a little sugar three times a day may correct constipation.

Cathartics for infants.

As to cathartics, Castor oil is one of the best for infants if needed not more than once a week. The frequent use of small quantities of olive oil is often a good means in case of young infants, the oil being added to the food.

Gas on the stomach.

In flatulence (excessive formation of gases in the stomach or intestines), cinnamon or peppermint water may be given. Lime water, tablespoonful to six of milk will prevent the milk from curdling and prevent sour stomach. Milk of magnesia may be used, teaspoonful in two ounces, warm water, as though it were lime water.

The nose must have attention.

The nose of the infant needs particular attention; the mother should see that it is clean so that the breathing is not interfered with. In cases of considerable nasal obstruction a glass, or hard rubber syringe with a soft rubber tip may be used, this is best done by fastening the

child's arms securely to either side with a sheet, then placing the head on the pillow, sidewise and placing the left hand on the side of the head to steady it, placing the soft rubber tip of the syringe into the near nostril, allowing the water to return through the lower nostril. Then turn the child over and repeat the same process with the other nostril if need be. The syringing should be done from behind—the nurse standing behind the child. When properly done there will be no prostration and very little irritation. A well refined oil of vaseline may be used, applying it on a little cotton wrapped on a tooth pick.

Adenoids caused by mouth breathing.

Adenoids are a growth of lymphoid tissue situated at the vault of the pharynx obstructing the nasal passage to the wind-pipe and is caused by neglecting the infant's nose which becomes obstructed from taking cold, the infant then breathing through its mouth. There being no use for that portion of the air passage, nature fills that space with a vegetation or lymphoid growth, "adenoids."

Almost every case of adenoids could have been avoided by proper care of the infant's and child's nostrils. If these are kept clean from the time of its birth, there will be no mouth breathing, and consequently no adenoids.

Earache.

Earache, is mostly caused by a catarrhal condition of the child's nose and pharynx—the infection entering through the eustachian tube. The treatment is mostly preventative, and that is by keeping the nose, mouth and throat free from infectious material.

Swelling of glands of neck and throat.

Adenitis (inflammation of glands), consists of inflammation and swelling of the glands under the ear, tongue, and about the neck. Is mostly due to colds and infection from

the nasal and pharyngeal passages, and carious (ulcerated) teeth.

Treatment.

Treatment should be preventative, which requires that treatment which is directed to catarrh of the nose and throat. The mucous membrane should be kept clean. In the acute stage (the early stage) of inflammation, a cloth or towel wrung out of very hot water applied to the throat and neck several times may prevent suppuration, or wring a cloth out of a quart of hot water to which a level tablespoonful of Epsom salts has been added, apply to the throat and tie a dry cloth over that and leave on all night, this may be repeated next day. Advanced cases should be treated by the physician.

Tonsilitis and treatment.

Tonsilitis is an inflammation of the tonsils, due to infectious disease, such as diphtheria, scarlet fever, measles, catarrhal inflammation of the mucous membrane of the pharynx and mouth, decayed teeth, etc.

Treatment for simple and follicular tonsilitis by the laity consists chiefly in preventing the infection of the mucous membrane of the tonsils, etc. Have decayed teeth repaired, cleaned, or extracted. Upon notice of pain, apply a cloth wrung out of a quart of hot water, in which a level tablespoonful Epsom salts has been added, apply around the neck and cover that with oiled silk or some other cloth which will hold the moisture; leave on during the night or until dry, when it may be repeated. Swabbing the throat with peroxide one to three of warm water, three times a day or a solution of common salt and bicarbonate of soda, teaspoonful of each to four ounces of water will make a cooling and antiseptic wash or gargle. It is obvious that the patient should drink nothing cold, hot drinks; hot water drunk has even a more curative effect than hot applications externally, and cold drinks will chill the tender tissue. A good dose of physic is always in order, and next to castor oil some of

the mineral cathartics in small but frequent doses will do best. The mineral water may be sweetened to taste. Epsom salts ¼ to 1 teaspoonful in hot sweetened water will make a good cathartic in such cases. Add a few drops of lemon or orange juice to flavor.

Things Which Are Bad for All Babies.

Pacifiers.

Thumb sucking.

Soothing syrups.

Patent medicines.

Whisky or gin for supposed colic.

Dirty playthings, dirty nipples, dirty bottles, dirty floors.

Waterproof diapers except for temporary use.

Moving-picture shows.

Violent rocking, bouncing and rollicking play at any time.

Play of every sort after feeding.

Kissing the baby on his mouth either by the family or by strangers.

Testing the temperature of the baby's milk by taking the nipple in the mouth.

Sucking on empty bottles.

Sleeping on the mother's breast while nursing.

Sleeping in bed with the mother.

Spitting on handkerchief to remove dirt from baby's face.

Sneezing and coughing in the baby's face.

Allowing a person with cough or a cold to hold the baby.

Allowing any person with tuberculosis to take care of the baby.

The baby is not a toy or plaything, but a great responsibility; its health, growth and happiness depends largely on you.

THE BREAST-FED BABIES.

The summer care of babies.

Breast milk is the best milk for the summer.

Breast-fed babies seldom have severe diarrhea. If they vomit or have acute indigestion it is usually because they are fed too much or too often, or because the mother is so sick or tired out that her milk is poor.

In very hot weather the baby should nurse less often. Give him the breast only every four hours, but give cooled not cold boiled water freely between the nursings.

The bottle-fed babies.

They are much more likely to get diarrhea. If they have diarrhea it is much more often severe. The milk must be clean and kept cold, but not fed cold. It should be boiled or pasteurized—the surest is that which is boiled at the child's home.

The bottles and rubber nipples should be boiled daily and kept very clean best in glass of water with a teaspoonful of bicarbonate of soda.

In very hot weather the baby needs less food but more to drink. His milk should therefore be diluted with boiled water and cooled, not cold boiled water given between feedings. It is easier to prevent diarrhea than to cure it.

The important means of preventing diarrhea are:

1st. Boil all milk.

2nd. Dilute the baby's food in very hot spells of the weather.

3rd. Stop the food at once, when an acute diarrhea begins. If the movements become loose and only two or three a day, do not neglect it because the baby happens to be teething, it may mean the beginning of a serious illness. Dilute the food with an equal amount of boiled water and give less than the usual amount at a feeding. If the movements are more frequent and there is vomiting or fever, stop all food at once and give only boiled

water, and call a doctor. After twelve hours without food, barley-water, one tablespoonful to one pint, may be given. Proper treatment at the beginning of a diarrheal attack is worth more than many day's treatment later.

General Care of the Baby.

General care of the baby.

The clothing in hot weather should be light and on very hot days only the light shirt, band, and napkin should be worn. Bathe the baby morning and evening and on very hot days also in the middle of the day.

Napkins when soiled should be placed at once in water and washed as soon as possible.

The baby needs fresh air quite as much as fresh food. Keep him out of doors as much as possible.

Avoid the sun on hot days.

In very hot weather take him out early in the morning and in the late afternoon and early evening.

It is often cooler in the house, with shades down, in the middle of the day. Take the baby to the park, and to the country whenever you can.

To Avoid Infection.

To avoid infection.

Keep the room free from soiled clothes and rubbish.

Do not let the baby play with cats or dogs.

Cats and dogs carry disease to babies.

Do not let the baby crawl around on a dirty floor, or dusty carpet. Place him on a clean sheet or blanket.

Keep playthings and pacifiers out of his mouth.

Flies carry disease to babies. Screen the baby's room.

Keep flies away from the baby and his food at all times.

Cover the crib or carriage with netting to keep out the flies and mosquitoes.

CHAPTER LXXIX.

Disease of the Respiratory System—Nasal Catarrh-Coryza (Cold in the Head).

Respiratory system.

A CHILD suffering from acute coryza should be kept in doors in a room of even temperature of about 72 degrees F.

The bowels freely opened and the amount of food somewhat reduced. Medication should be guarded—too much medicine is not good.

The preventative treatment is of most value—young infants are often kept too warm—they sweat and are then uncovered and taken into a cold room.

Colds in the head.

Colds in the head of very young infants is frequently due to cool air or wind striking its sweat—damp head at or after nursing and by taking him up off its bed without properly drying the sweat from the head and neck of the infant. When nursing he sweats, and when asleep, he sweat, then when he is uncovered or taken up from the hot pillow, and brought in the cool room with damp hair and neck that gives him a cold in the head, snuffles, coryza, closing of the eustachian tubes resulting in earache, adenoids, etc.

Treatment.

The best treatment is that which prevents, and by removing the cause, for example remove the obstruction that prevents the child's breathing through the nose. When taking the infant up wipe off the sweat and cover the head with a light shawl, napkin or hood. With these simple observations many spells of illness may be avoided.

Cold feet cause indigestion and colic.

Cold feet, wet diapers, and other clothes permitted to remain on the child are sources of much trouble, colic and colds disorders of the bowels and stomach are often results of wet diapers, under clothing and cold feet. A

draft of cold air for a few minutes may excite sneezing and a nasal discharge. Acute nasal catarrh may be a symptom of measles, nasal diphtheria or la grippe.

Care of the mouth of the infant.

Care of the mouth and teeth—The mouth of the newly born infant should be gently cleansed at each morning's bath with sterile (boiled) water and a soft cloth; the cloth may be folded over the nurses little finger and so applied to the tongue, gums and pharynx. On the first appearance of thrush the mouth should be cleansed after every feeding with a weak solution of bicarbonate of soda or borax: one-third of a teaspoonful (20 grains) to the ounce of warm water, previously boiled. Harm is frequently done by using too much force in cleansing the mouth—be gentle.

Primary teeth.

The primary teeth as well as those of the permanent set should receive daily attention.

Too often they are neglected altogether. Dirty teeth are likely sooner or later to become carious and carious teeth besides being the cause of bad breath and neuralgia are a constant menace to the health of the child. They are harbors for infectious germs of all varieties. And when they become carious they should be filled or removed.

Care of the eyes.

Care of the eyes—During the first few days at the daily bath, the eyes should be cleansed with a solution of boric acid, and carefully protected from strong light. It is desirable that a child should sleep in a darkened room.

Care of the skin.

Care of the skin—The skin of the young infant is exceedingly delicate and excoriations and eczema are very common occurrence. *These conditions are more easily prevented than cured.*

The first essential in the care of the skin is cleanliness, and this must be secured without use of strong soap, or too much rubbing. Napkins must be removed soon as

soiled or wet. Some bland absorbent powder, such as starch, talcum powder, or stearate of zinc, should be used in all the folds of the skin—in the neck, arm-pits, groin, thighs, and the genitals, particularly in fat babies.

If plain water produces irritation then the salt or bran bath should be employed.

If chafing occurs that will yield to a few applications of plain vaseline after each change of napkins.

Care of the genitals of the female.

Care of the genital organs—The female genital organs need but little attention in young children, excepting as to cleanliness. This is more often neglected in older children than in infants. Vulva-vaginitis is very common among the children of the poorer classes where cleanliness is neglected.

Care of the male genitals.

In males the prepuce (foreskin) should receive attention during the first few days or weeks of life.

In most instances even if the foreskin is long it may be retracted several times during the week and need not be circumcised. If the opening is small it should be dilated, and if there are adhesions they should be broken up. Whatever is needed should be done in early infancy, as this can be done then with less pain and discomfort to the child, and obtain better results; while if neglect during infancy is apt to be overlooked until harm has been done by local or reflex irritation. Retracting the prepuce fully and cleansing the parts, causes it to adjust itself so that circumcision is not needed. The foreskin is by nature intended to be a protection for the gland.

The doctor who delivers the child should retract the prepuce and instruct the mother how to care for it in the future.

The sleep of the infant child.

The sleep of the newly-born infant is profound for the first two or three days and under normal conditions, almost continuous, but not very deep after the first month.

A healthy infant during the first few weeks sleeps from twenty to twenty-two hours out of the twenty-four, waking only from hunger, discomfort or pain. During the first six months a healthy infant will usually sleep from sixteen to eighteen hours a day, the waking periods being from half an hour to two hours long. When two years old, usually thirteen to fourteen hours sleep are taken, eleven or twelve hours at night, and one to two hours during the day. After the third year the heavy sleep of children is not commonly seen.

Proper habits.

Training in proper habits of sleep should begin at birth. From the outset an infant should be accustomed to being put into its crib while awake and to go to sleep of its own accord. Exercise is no less important in infancy than in later childhood. An infant gets its exercise in the lusty cry and kicking its legs about, waving its arms, etc. Infants who are old enough to creep or stand usually take sufficient exercise unless they are restrained. At this age they should be allowed to do what they are eager to do. Every facility should be afforded them for using their muscles, but be careful that they get into nothing that may hurt them, and that they use no dangerous playthings, and get nothing injurious to put into their mouths to suck or swallow.

Exercise in infancy and childhood.

Jaundice in infancy.

Icterus or jaundice, is quite common in the new-born and is seen in various forms and may last for some time; is usually of a mild form needing but little if any care while other cases need special attention. It occurs in children as in adults, from two general classes of causes. The first includes those cases in which there is some obstruction to the flow of bile from the liver into the intestines or obstructive jaundice.

The second group is classed as nonobstructive, and depends upon certain changes in the blood itself. This is seen in the physiological jaundice of the newly-born

in that associated with septic conditions and as a result of certain poisons.

POEM.

Eagerly, we gather around,
Trying, to the fraction of a pound—
Baby's weighing.
No matter what the scales have told,
"You are worth your weight in gold"
True, the saying.

Best of health and life sustaining,
Baby must in weight be gaining
And in love—
Gain in strength and gentle heart,
Grace and tenderness impart
From above.

CHAPTER LXXX.

FEEDING OF INFANTS.

Feeding the infant.

THIS subject is too large to discuss fully in this book, but a few instructions of routine importance will be given, that should be of great help for many mothers. The best food for the infant of course, if all is well is from the mother's breasts. And artificial feeding as a rule, each instance must depend upon such feeding, as is suitable for the individual case.

Warm water to drink.

Many infants will do well if between breast feeding, it is fed some warm water, most infants do not get enough water—and in case of feverish conditions, when it wants to nurse every little while, if water is fed will do better,

and is less trouble to the mother, feed the water in a nurse-bottle and at least blood warm. In case of deficient nutriment barley-water will be found one of the best additions to breast feeding as well as to artificial feeding.

Barley-water if properly prepared frequently serves to modify the mother's milk.

Cow's milk for the infant.

Infants who must be fed artificially will as a whole do best on cow's milk, best not from one cow but from a herd. The milk should be properly certified, efficiently pasteurized or preferably boiled.

Sterilize all milk before feeding.

Heating the milk is the only certain means of protection from the organism of diphtheria, tuberculosis, typhoid fever and other infectious diseases introduced into milk by carriers or through contamination in other ways in its handling from the time of milking to the time of delivery.

In favor of heated milk is the fact that curd produced by rennin coagulation is softer, less tough and more flocculent than that produced in raw milk.

The heated milk is constipating because it contains fewer bacteria and is therefore less irritating than raw milk.

Method of Sterilization—Simple and Reliable.

Method of sterilization.

1st. Use a double milk or a sauce pan; if, however, this cannot be obtained put the milk into an ordinary covered saucepan and place it inside a larger vessel containing water.

2nd. Let the water in the outer pan be cold when placed on the fire.

3rd. Bring the water up to the boiling point four minutes without removing the lid of the inner milk pan.

4th. Cool the milk down quickly placing the inner

pan in one or two changes of cold water without removing the lid.

5th. When cooled down, aerate the milk by stirring well with a spoon.

Modify with cereals.

Cow's milk then may be modified by various admixtures, barley-water, oatmeal-water prepared foods to be had in drug stores, etc. Barley-water and other cereals will prevent the accumulation of hard tough curds in the child's stomach and the same time furnish at times modified or needed nourishment, and are used in place of pure water.

"The Materna," a graduate, to be obtained through any drug store or direct from the manufacturers.

The Materna Company, 70 Warren Street, New York, is the best apparatus for home modification of cow's milk, and where there is any difficulty should be procured.

Preparation of barley water.

Barley-water may be prepared from barley flour to be had at the drug store, direction on the package, but better from the whole grain "pearl barley," which is to be had at the groceries.

To make barley-water from pearl barley, the same kind as used for barley soup, may be made as follows:

Take two heaping tablespoonfuls of pearl barley, soak in water six hours, decant the water off of it, then add one quart of fresh water, steep in boiling water six hours, keep the amount of water at one quart, so that you will have one quart of finished barley-water, strain through cheese cloth, and set in the ice box or cool place and feed in place of warm water or mix with milk as one would ordinary boiled water. This may be used in case the milk will not digest, or in combination with milk for artificial feeding, and in case of sour stomach, etc. It is best not to feed the infant ordinary food for a day or two to give the stomach a rest, put him on barley-water, etc.

How to keep baby well.

Nothing can fully take the place of mothers' milk. The infant's stomach does not readily accommodate itself to changes in diet. If the mother is not able to satisfy the infant, Cow's milk, modified with barley water, oatmeal or rice water may be given alternately with breast feeding.

Care of the nursing bottles.

As soon as the baby has finished his feeding throw the remaining milk away. The bottle should be cleansed after a feeding, by first rinsing with clear water, and then thoroughly washed in hot soapsuds and a bottle brush. Then rinse the bottle with boiled water and kept filled with boiled water until ready for use again.

There should be enough bottles so that there are always several bottles ready to be used.

No tubes should be used; it is impossible to keep them clean. When the rubber nipples become coated, a little salt will clean them. Babies should be fed at regular times, and put to sleep at regular hours. Infants should have some warm water three times a day, best from a nursing bottle. The water should be boiled, cooled, and then warmed before feeding.

Cow's milk should be sterilized soon as it is brought from the Dairy by bringing it to the boiling point, even is pasteurized.

The baby should not be fed solid food before it has teeth with which it is able to masticate the food. Meat should never be given very young children.

A baby can be safely weaned at the age of one year, but that depends upon season and upon the health of the baby, and should never be undertaken in hot weather —June, July or August. Then it may be given modified milk, gruel or some prepared food.

Babies should never be allowed to eat at the table before two years of age; and eat little of starchy food

until four years old. Milk for babies should be from a herd of cows; cows are not unlike the human in respect of variation in health; if from one cow it is apt to vary in quality in accordance with her food or condition of health.

A healthy baby should not be fed in less than two hours from the finish of the last feeding.

A delicate child should be oiled after each bath with Olive oil; in cold weather this may take the place of the bath.

Convalescents. Children, recovering from sickness, should eat moderately of good fresh, ripe fruit; but, never whether well or sick, eat the skins of any kind of fruit. Disease germs are often communicated in that way.

CHAPTER LXXXI.

Thrush.

Thrush, its prevention.

IS A PARASITIC inflammation of the mouth, characterized by the appearance upon the mucous membrane usually of the tongue or of the cheeks, of small white flakes or larger patches. It is common in infants of the first two or three months, and in all protracted exhausting diseases of early life. It is especially frequent in children suffering from malnutrition, marasmus, or wasting diseases. Its growth is favored by slight abrasions, such as may be produced by rough methods of cleaning the mouth, and accumulation due to want of cleanliness. It is difficult or impossible for thrush to develop upon healthy mucous membrane.

Treatment and prevention of thrush.

Treatment—Thrush may be prevented in almost every case by due attention to cleanliness of the mouth, rubber nipples, bottles, etc. All rubber nipples should be kept in a solution of borax or bicarbonate of soda, and the child's mouth should be cleansed several times a day. On no account should a feeding bottle be passed from one child to another. In the *treatment of the disease,* the essential things are cleanliness, and some mild antiseptic mouth-wash, such as a solution of boric acid several times a day.

CHAPTER LXXXII.

Acute Pharyngitis.

Inflammation of the throat.

INFLAMMATION of the throat may exist as a primary or secondary disease, or with any of the infectious diseases, particularly in measles, scarlet fever, diphtheria,

and influenza (la grippe). Also in acute catarrhal conditions usually following a cold.

Tonsilitis, inflammation of the tonsils and ulceration of the tonsils are included in this, and treated the same as pharyngitis.

The treatment, of course, depends much upon the cause, there are a few things that are always to be done for these cases by the family, and if used at the very beginning may avoid more serious trouble.

Gargles with a solution of salt and soda, a solution of vinegar, salt and sugar, makes a good remedy, or diluted vinegar and aloe.

A safe procedure is to administer a cathartic; keep warm, avoid cold wind, wet clothes and cold drinks; have them drink plenty of hot, but no cold water. Best have them remain in a warm room.

Cold drinks chill.

Cold drinks chill the throat and stomach, and so increase the malady.

Unless the parents find prompt improvement or are certain that it is not one of the infectious diseases, such as diphtheria, scarlet fever, etc., they should not depend upon home remedies, but at once send for medical aid.

Croup and symptoms.

Croup is not often seen during the first six months of infancy, but is frequent from this time up to three years, after five years it is rare, occurs in the well nourished as well as those who are not. Much depends upon predisposition.

Croup is known as spasmodic croup, "false catarrhal croup," acute catarrhal laryngitis, inflammation of the larynx, membranous croup or true croup, and as simple catarrhal croup, and is characterized by a mild degree of catarrhal inflammation; the attack may be preceded for several hours by a slight hoarseness or by nasal discharge; during the day the child may appear perfectly well. Usually during the evening there is heard a hollow, barking cough, at first infrequent, and not severe,

later in the night or near morning difficult breathing. As soon as it becomes marked the child awakens, and presents the characteristic symptoms of an attack.

The treatment is preventive.

The treatment should be to prevent the attack. Observe the tendency and overcome that by proper feeding and clothing. Prevent them from taking cold, and when they have a cold treat that; keep them in their room or in bed at even temperature 70 to 72 degrees. Give a good cleaning out cathartic, castor oil or salts. The attack may be best treated by administering a teaspoonful of hive syrup or syrup of ipecac to produce vomiting, then 10 to 15 drops every two hours to keep the cough loose. At the beginning or in mild cases, a sponge moistened with hot water may be applied to the throat, or the child may be placed in a hot bath.

Allow no cold drinks, but all the hot water they want. Hot water will do everything that is good in cold water, and is sure to do no harm.

Membranous croup.

Membranous or true croup, or laryngeal diphtheria presents about the same symptoms, so far as the laity usually observe, as catarrhal croup, and requires about the same treatment, adding that which is required for the throat symptoms, and must be treated more energetically.

Treatment.

Soon as it is discovered that it does not yield to the home treatment within a few hours, call for a physician because that indicates membranous croup.

The child should be kept away from all others of the family except those who nurse it.

Procure a croup kettle in which use limewater and add 15 to 25 drops of cedar oil, if it cannot be had, use spirits of turpentine and let the child inhale the steam. A small teapot may be used in place of the croup kettle, but is not so convenient.

Use a croup kettle and no cold water.

Give the child as much warm water (warm as it can drink) as it desires, but no cold water, nor cold applications without specific instructions from the physician. The croup kettle may be used in other throat and lung troubles. If the physician cannot be had in time, and if the breathing becomes difficult a ¼ teaspoonful, 15 drops of coal oil may be given, or ½ teaspoonful of simple vaseline melted and given to drink, to loosen the membrane.

CHAPTER LXXXIII.

DIPHTHERIA.

Diphtheria.

IS A SELF limited acute infectious disease and tends to get well, and nearly always does unless it is in a complicated and virulent form.

It is usually characterized by the formation of a false membrane upon certain mucous membranes, especially those of the tonsils and throat, and may extend to the mouth, larynx, or nose. In the beginning the symptoms may be similar as in croup, especially in membranous croup, to which it is a close ally by some authors classed as one and the same disease, in a more aggravated form.

Treatment of diphtheria.

The treatment—See that the bowels are active. Keep the patient in a separate room, allow no other member of the family in that room except those who serve as nurse; allow none to use the same dishes nor the same vessel that the patient uses. The medical treatment so far as that of the laity and nurse, is along the same lines as other throat diseases and inflammation, tonsillitis, etc. Swab the throat with antiseptic solutions, hydrogen peroxide 1 to 3 parts of water every one to three hours

is one of the best local applications. A solution composed of two heaping teaspoonfuls of common salt and the same of bicarbonate of soda and of Epsom salts a half ounce of glycerine in enough water to make a four-ounce mixture; swab the throat and mouth, and if necessary spray or douche the nose every one to three hours, or alternate with the hydrogen peroxide mixture.

Gargles.

The salt, soda and Epsom salts, makes a cooling and healing application. This may be mixed in cinnamon water which is an improvement, on common water, and use it as a swab, gargle or spray.

External applications.

Turpentine and lard or vaseline equal parts may be applied externally to the neck and throat. Keep the throat well protected from cold air. Moisture so applied must be hot. Beware of cold drinks, but take all the hot water desired.

Nursing infants.

Nursing infants suffering with diphtheria may be fed on breast milk, obtained by a breast pump, but must not be put to the mother's breast. This may be modified by feeding a great deal of warm water from the nurse bottle, warm water is safe. The infant needs more water in time of illness, especially in cases of fever.

Food of which should be liquid.

Older patients should be fed along the same line, where possible on liquid foods, milk is a good food in such cases, provided it is mixed with cereals, mush and milk, toast in milk, etc., to prevent formation of large curds in the stomach. Take plenty of hot water, but no cold or even cool water should be allowed. This holds good in all fever cases, but especially in throat troubles. Food in fever cases, if not properly prepared and if hard to digest, aggravates the trouble by causing indigestion, the food ferments and putrefies which causes toxines.

These treatments are for the laity.

These directions for treatment are intended for the laity, in the main to encourage early attention and so prevent seriousness of diphtheria.

In severe cases or when known to be diphtheria the physician should be called into the case and his directions followed. Diphtheria antitoxine is the recognized specific against this malady, but other remedies should be employed just as though antitoxine was not used.

CHAPTER LXXXIV.

SCARLET FEVER—SCARLATINA

IS AN acute, contagious, self-limited disease one attack usually protects the individual through life.

Diagnosis.

It is characterized by high fever, a rapid pulse, a scarlet rash, sore throat, and a marked tendency to inflammation of the kidneys. The period of incubation, between infection and its manifestation is from two to six days. The susceptibility of children to the scarlatinal poison is much less than the measles, still it is much greater than that of adults.

Prevention.

Prevention consists in isolation for four weeks, or until desquamation (shedding of the scales) is complete. Patients should not be allowed to mingle with other children for at least one month after all symptoms have subsided, and should not sleep with other children for three months. Children in the house who have not been exposed should be sent away, and those who have been exposed should be put into separate rooms.

Isolation and quarantine.

The nurse should be quarantined with the patient, and not mingle with other members of the family until a complete change of clothing has been made and the hands and face

thoroughly disinfected. The nurse and all others in close contact with a severe case should use frequently an antiseptic gargle and nasal spray.

Care of infected clothing.

The clothing and bed clothing removed during the attack should be at once put into a solution of zinc sulphate 4 ounces, common salt 2 ounces, and water one gallon, and afterwards boiled at least two hours in the solution. Soaking the clothes as they come from the patient and bedding at once and then boiling thoroughly in itself destroys all bacteria without antiseptics. Instead of handkerchiefs, pieces of old muslin, surgeons' gauze, or absorbent cotton should be used for cleansing the nose and mouth of the patient and immediately burned.

Treatment.

Treatment—There is no specific for scarlet fever so far as known, and it must be treated according to symptoms and complications. Mild cases need little or no treatment. Children should be kept in bed for at least one week after the symptoms have subsided, kept on fluid diet for a period of three weeks. This is important to prevent inflammation of the kidneys. (Bright's disease.) Plenty of fresh air, but no draft should be provided in the sick-room.

Patients should have no cold drinks.

Most complications are caused by colds and wrong feeding. Don't forget that these patients should have no cold drinks. It is but to be expected that when a cold draft will injure the external parts and cause a chill, increased fever and relapses, cold water will chill the tender throat and the stomach, let them drink hot water; one of the best remedies you can give in fever cases of every kind, but especially in cases where the throat is involved as in scarlatina.

Regulate the bowels.

The bowels should be kept regular, with two or three evacuations each day. Rochelle and Epsom salts equal parts in hot water—enough to bring about the desired results, di-

viding it in three doses, daily for a few days during the fever stage will act as a febrifuge. This is a disease that should be in the hands of a physician, especially in severe cases.

Anoint the patient.

As soon as the fever disappears, the entire body should be anointed with a thin coat of carbolized vaseline or one per cent ichthyol ointment, the latter is the safest twice daily. This will almost prevent infection from desquamation or scaling. Then a daily wash with soap and hot water will do well, but the ointment should be used for a week or more after all symptoms have disappeared.

Sick-room.

The sick-room should be darkened, as the eyes are very sensitive to light. Every child with measles should be put to bed and kept there with light covering during the entire period.

The most frequent, and most important complications of measles is broncho-pneumonia and inflammation of the throat or ears, weakened eyesight, and affections of the digestive tract, kidneys and heart.

Much depends upon the care the child receives during the attack, if well cared for in bed and sick-room there is but little danger of complications.

Most complications of measles are due to taking cold, wrong feeding, etc. There should be no cold water and ices drunk or eaten during the attack of the disease, chilling checks the coming out of the poison, and may result in auto-toxemia of various kinds, and attack vital organs so that they will be impaired or finally in death.

Convalescence — care of eyes.

During convalescence the eyes should be used carefully for at least three weeks, should a slight cough and fever persist, with or without physical signs in the chest, the patient should be kept in a warm room. Medicines, such as cod-liver oil emulsions and tonics containing iron should be administered. The bowels and digestive organs looked after. The saline laxatives are the best, and

should be used from the beginning. They need not even be used as cathartics, in small doss three times a day for three days or a week, in such portions they often act like magic in quieting the feverish condition to which most of the coughs during that period should be attributed.

The cough itself should be treated as an ordinary bronchitis. The contagiousness of measles may be lessoned by anointing the patient two or three times a day with a thin application of carbolized vaseline.

CHAPTER LXXXV.

Chicken-Pox

IS AN acute, contagious disease, characterized by a skin eruption of pimples and blisters (papules and vesicles), and by mild constitutional symptoms; serious complications and sequelae (after effects) are rare. The period of incubation is from fourteen to sixteen days from the time of contagion. There may be noticed for twenty-four hours before the eruption appears slight fever and general indisposition.

Fortunately the eruption usually appears on the trunk as small red widely scattered papules and in a few hours turns into vesicles, in most cases they appear in crops, new ones continuing to appear for three or four days, even upon the same parts of the body. The earlier ones have generally begun to dry by the time the later ones appear so that all stages of the eruption may be present at one time and in the same region.

Treatment.

Treatment—Although it is usually a trivial disease, every case should be isolated. The disease may be conveyed so long as crusts are present. The itching may be modified by anointing the parts with vaseline or cold cream or with glycerine. Care is necessary that the skin is kept clean, and scratching prevented. The general or constitutional treatment is the same as in other eruptive children's diseases.

CHAPTER LXXXVI.

Measles

IS A CONTAGIOUS epidemic disease, characterized by catarrh of the respiratory tract, moderate fever and a red papular eruption, which appears on the fourth day and lasts from four to five days, and is followed by branlike desquamation. This is more widely prevalent than any other eruptive fever, very few persons reach adult life without contracting it. One attack usually confers immunity. It is highly contagious even from the beginning of the invasion, and spreads with great rapidity from patient to all susceptible persons exposed. The poison does not cling to the clothing or apartments as long as that of scarlet fever.

Measles has a period of incubation of from eleven to fourteen days, that is, it manifests itself in eleven to fourteen days after the contagion, the duration is about three weeks.

Treatment. Most writers assert that measles is a self-limited disease and that treatment is useless.

We beg to differ. All germ diseases are self-limited, if left to themselves. In measles, we are apt to have complications that may terminate seriously. The best way to treat measles is to begin early and in order to secure normal intestinal conditions it is well to give the child Calomel in 1/10 to 1/6 gr. tablets, according to age, every ½ or 1 hour, four doses. One hour after the last dose a saline laxative, Epsom Salts or Sodium Sulphate, and keep the bowels in good condition during the time of the measles with the same salts. The child should be stripped, piece by piece, and sponged with a solution of Magnesium Sulphate (Epsom Salts), as fol-

lows: In a quart of hot water dissolve two ounces of Epsom Salts, and fifteen drops of Creoline or Lysol. Cool to body temperature. This solution should be used twice daily during the eruptive stage; it lessens irritation, prevents infection, keeps the pores open and active, and generally soothes and quiets the patient.

It may be well to put a few drops of Olive oil into the ears to prevent earache.

The diet should be light: barley water, gruels, custard, light broths, with stale bread or crackers, fruit juices being ample at first.

CHAPTER LXXXVII.

Whooping-Cough. IS AN infectious disease, characterized by catarrh of the respiratory tract and peculiar paroxysms of cough, ending in prolonged crowing or whooping inspiration, which occurs both sporadic or periodically in districts epidemincally.

Most frequently met in children, but unprotected adult are not exempt.

Treatment. There is as yet no known specific for whooping-cough, but the treatment consists in prevention by isolation of the patient and disinfection of articles used by him.

The time to cure whooping-cough is before the "whoop" is heard. Even after that, much can be done to shorten the paroxysms—and may even avert the disorder. Regulate the bowels with Saline laxatives and treat the cough—best at the direction of the physician.

An abdominal bandage from the ribs to below the umbilicus will be of great relief. Fasten with tapes over the shoulders and around the buttocks—a crash towel may answer for the bandage.

Fresh air, sunlight, protection from changes of

weather and other means of taking cold, a light but nutritious diet. In some cases it may be desirable to keep the patient in his room or in bed for the first few days, but ordinarily, if the weather is good, he need not be confined indoors. Alleviation of its violence, as in a cold, cough is the chief thing. Attention to the general health, feeding and regulation of the bowels, are matters of much importance.

CHAPTER LXXXVIII.

MUMPS

Should be treated with much care.

IS A CONTAGIOUS and infectious disease, characterized by inflammation of the parotid and other salivary glands with constitutional symptoms which are usually mild.

Severe complications and fatal terminations are rare. Period of incubation is one to three weeks. The disease is not very common and general, epidemics are infrequent. It is contagious from the beginning of the symptoms. Only a small proportion of those who are exposed take the disease. Infants are rarely affected. The disease occurs mostly between the fourth and fourteenth years, one attack usually confers immunity against others. The disease is communicable for several days after the swelling subsides, and, for safety, a case should be isolated for three weeks from the beginning of the symptoms, or at least ten days after the swelling has disappeared.

Complications and sequelæ are few and usually unimportant, but in adolescence they are occasionally serious. Inflammation of the testicles in the male, ovaries, breasts and vulva in the female, are rare in childhood. When inflammation of the testes does take place, it is generally towards the end of the second or

beginning of the third week, it is usually ushered in with marked fever, and sometimes a chill; if severe, nervous symptoms may be present. The body of the testicles is generally effected, and the duration is usually three to four days or a week. Though the testicle is often enlarged for some time afterwards, shrinking of the organ may follow, which may mean sterility. In females, congestion and swelling of the breasts, ovaries and labia may occur; and although these complications are rare, most of them have been observed, even in young children. Inflammation of the kidneys may follow mumps, even as late as four or five weeks after the attack. Facial paralysis has been reported.

Treatment. Notwithstanding that the disease is self-limited, and in most cases very little treatment is required, the patient should have care and attention because of the complications that may arise. If constitutional symptoms are present the patient should be kept in bed, and if there are none, he should be confined in the house. The glands should be protected with cotton or woolen bandages. Hot applications are a relief for pain. The bowels should have care, Saline aperients, such as Epsom salts or its compounds, are best suited in these cases. The diet should consist of liquids on account of pain in masticating food. The mouth, nose and ears should be kept clean by the use of some antiseptic wash. A solution of salt, soda or borax will do well. Oil of turpentine one part to six parts of Olive oil makes an excellent application; Camphorated oil is another. The nose and ears may be treated with either of the oils mentioned.

CHAPTER LXXXIX.

"Typhoid Fever"

Prevention is the first treatment.

IS AN acute infectious disease due to a specific germ (typhoid bacillus). It may affect the unborn; it is seen in infancy and throughout childhood, but it is not until after the fifth year that it can be said to occur frequently. In typhoid fever there is inflammation and ulceration of the intestines and mesenteric glands. This diseased condition of the bowels distinguishes this fever from others, and may be detected by sensitiveness to pressure over the lower part of the abdomen, or it may be confined to the right side.

Typhoid fever is almost invariably contracted by drinking water, milk or other food that has been contaminated with the disease germs.

Water should be boiled before drinking.

The infrequency of typhoid in infancy is explained, by the fact that most of the water, and a large part of the milk taken is previously boiled or heated to the extent of killing the germs.

Another mode of infection is due to flies carrying the germs from the excreta (discharges) of the patients alighting on the food in the kitchen, on the table, on candy, fruit, etc.

Treatment by the laity.

The treatment of typhoid fever, that which peculiarly belongs to the laity, is preventing the spread of the germs. All evacuations from the bowels and kidneys should be thoroughly disinfected. The vessel should contain a one per cent solution of chloride of lime of which the vessel should contain twice as much as of the stools and urine.

A teaspoonful of creoline to the quart of water may be used instead of the chloride of lime.

This precaution should be used as soon as typhoid fever is suspected.

The patient should be put in a separate room away from others of the family, and nothing, that he uses, should be used by others (dishes, clothing, etc.). The bed clothing and other clothing may be placed in a boiler filled with water, which, before washing, is boiled for at least twenty minutes before mixing with the laundry of the family. Formalin, a teaspoonful to one pint of water, makes a good disinfectant, and may be sprinkled about the sick room, with a whisk broom or brush, this will drive the flies out or kill them.

Castor oil is one of the best laxatives in suspected typhoid, and should be given every other or third day. The laity should not try to reduce the fever with cold sponging, unless it be at the direction of the physician; and then it should not be with cold, but tepid water; cool sponging is seldom required if the hot stupes, with Epsom salts, are applied. The bloating of the bowels may be best treated with hot turpentine stupes several times during the day. This consists in wringing a bath towel out of a quart of hot water to which 15 drops of Spirits of turpentine has been added; a heaping tablespoonful of Epsom salts added to this will be of double benefit; apply to the abdomen and cover with oiled silk cloth to retain the heat and moisture. As to feeding, there should be no solid food given during the attack, nor for three weeks after all symptoms have disappeared.

Milk alone not to be taken.

Milk alone should not be allowed as it usually increases the fever by forming tough, indigestible curds, and these cause toxines, fever, cough, and delirium. Milk, if used at all, should be mixed with cereals of some kind, milk gruel, milk and mush, milk on toast, etc.

Inflammation of the bowels.

Inflammation of the bowels should be treated with Saline enemas prepared as follows: R. Sulphate of Magnesia

(Epsom salts), dr. Iv. Sodium bircarbonate, dr. I, Sodium chloride (salt), dr. I, hot water 1 pint, inject and hold in the lower bowel; if rejected, then wait one hour and repeat. Repeat daily, and retain as long as convenient; that will reduce inflammation of the bowels and the fever. This prescription may be used for any case of fever, especially when in the abdominal region —peritonitis and so forth.

CHAPTER XC.

Tuberculosis (Consumption)

Predisposing cause is lowered vitality.

IS AN infectious communicable disease due to the tubercle bacillus.

It may be local or general, and may involve any organ and almost any structure of the body.

The predisposing causes are constitutional or local.

The general predisposing causes include the surroundings in so far as they affect the constitution and lower the general vitality, enfeebling the resistive power of the tissues.

Local predisposition is created by any diseased condition of tissue in any part of the body, but especially the mucous membranes of the various organs and the lungs.

The most important are repeated attacks of bronchitis, bronco-pneumonia, pleurisy, chronic catarrhal inflammation of the nose, throat, etc., and less frequent diseases of the intestines.

Disease depends upon lowered vitality.

Tuberculosis does not depend so much upon the infection by the tubercle bacilli, as it does to the soil (a devitalized condition), in which bacilli may thrive. A normal constitution cannot be infected by tubercle bacilli to the extent of causing disease.

Treatment is the prevention of lowered vitality.

The treatment therefore is, first of all, prevention by maintaining, and by obtaining a healthy constitution. And secondly, if already infected to avoid all means by which the systems resistive powers may be lowered, and next build up as near as possible to obtain a healthy constitution.

Plenty of fresh air, not necessarily outdoor living;

it is natural that human beings should live in houses. These should be well ventilated, there is nothing better. Use good nourishing diet, avoid taking colds, wear proper clothing, use simple nutritious food, not more than can be well digested. Avoid cold drinks, ice cream, etc. As to drugs, that must usually be left to the physician, we have no specifics for tuberculosis. The throat and lung symptoms must be treated along the same lines as for pneumonia.

Cod liver oil or olive oil emulsions are good flesh builders when used in small doses.

Prevent, protect, and improve natural functions of the respiratory organs.

The laity, the parents are the ones upon whom we must depend for the most productive means of preventing tuberculosis, and that by improving the health of their children.

For ages it has been said that those with narrow chests are prone to this malady. It has at all times been looked upon as one of the characteristics of that disease, and that the thoracic abnormality was regarded as the consequence of the lung disease.

"That is a wrong idea, and is quite the opposite, the malformation of the chest is primary, and the lung becomes diseased because it is cooped up, badly aerated, and badly irrigated in this ill-formed thorax."—Freund.

Here we have the most valuable suggestion for the most potent preventative remedy, expand the chest, improve the breathing capacity by deep and slow breathing exercises. This should be done in early life. Soon as it is noticed that the child is narrow-chested and is old enough to be taught to perform these exercises parents should see that these exercises are taken at regular intervals, say morning, noon and night.

It is remarkable how much children and also young adults can improve their breathing capacity; that means better oxidation of the blood, and resistive power against disease of all kinds, but especially disease of the lungs.

Remedies that the laity can apply.

Things that prevent tuberculosis and can be observed by the laity are: Hygienic living, especially by avoiding dissipation, socially and sexually; observe proper rest, diet, ventilation in sleeping apartments, etc. Avoid overheating and sudden cooling in drafts after a dance. Avoid sitting behind open front windows of street cars, low neck and open chest waists, thinly clad chest in chilly weather. Ice cream improperly eaten or too much at a time, also ice tea and ice water, especially on an empty or overheated stomach. These and simular things can be avoided.

Food for the tuberculous.

Then as to food and drink, that may be contaminated with only tubercle bacilli, but other bacteria may be made harmless by sterilization, especially milk, by heating to the boiling point as soon as it is brought into the house. Also drinking water should be boiled before using. Finally, much has been said of the contagiousness of tuberculosis, so that many people are afraid to visit or attend tuberculous patients. This should not be so. There is no danger of contracting the disease so long as one's health is good. It has not been proven that anyone has contracted tuberculosis by reason of waiting upon or nursing tuberculous patients.

Neither that one has contracted tuberculosis by reason of living with a tuberculous patient.

Heliotherapeutic or sun treatment of tuberculosis.

In theory nothing could be simpler than heliotherapy (Sun cure) of tuberculosis, which consists in exposing a diseased part to the solar (Sun) rays, but its practical application necessitates a knowledge of certain well-defined rules which we will give as follows: *The solar rays must fall direct upon the integument* (the skin), without passing through a body of any kind; glass or cloth, for instance, has the property of absorbing 90

per cent of the chemical rays of the sun, the bactericidal properties of which are of the greatest importance. We must, therefore, not practice heliotherapy (sun treatment) behind closed windows or in a room provided with glazed windows. The window must be removed so that the rays of the sun fall upon the naked skin. Textures absorb a large proportion of the rays, in direct proportion to their thickness, and especially their color, a compartively very thin texture of a dark hue prevents the passage of any actinic ray. The body or parts, that are to be treated, must therefore be exposed naked to the solar rays and, in case of wounds, the dressing must be removed during exposure to the sun's rays.

Heliotherapy, like any other therapeutic agent, has its science or system of doses, or dosage, with which it is well to be familiarized to obtain satisfactory results.

To begin with, we must fight shy of too hot rays which expose the patient to the risk of sunstroke and its consequences.

Too cold rays on the other hand may determine pulmonary troubles. The first few sittings in the case of a patient who has not yet undergone any training should be at a solar temperature approximately that of the human body. It is only after a fairly protracted period of training that the baths can be taken at sun temperature of 90 to 120F.

Dr. Renaudet recommends the following procedure: The patient is installed as comfortable as possible on a steamer chair or on a bed so arranged that the sun's rays fall directly through the open window on the parts of the body to be insulated. The first day begin by two sittings of fifteen minutes, each, as far as possible, morning and evening, at a temperature of 95 or 105F.

Only expose the arms, the legs and thighs. Thereafter, progressively increase the duration of exposure

by five minutes daily, always at an average temperature of 100° F., insolating only the upper and lower limbs. This will bring the total duration to 50 minutes by end of one week. Then uncover the abdomen for fifteen minutes the first day, and as with the limbs, gradually increase the exposure by five minutes a day. During the second week the limbs will have 1½ hours' exposure and 50 minutes for the abdomen. At the commencement of the third week expose the thorax (chest) in like manner. In the course of the fourth week the treatment of the thorax will receive 50 minutes each sitting, daily. During the second month of the solar treatment, the complete naked body is entirely exposed (except the head) to the sun for two sittings of two hours each, or four hours a day. The head must be suitably protected with a wide brimmed hat or umbrella. At the end of the second month, often much earlier, the skin becomes distinctly pigmented.

This pigmentation gives the skin a bronze color accompanied by softness and a well-marked rich velvety tone which, apart from its other physiological effect, appears to be a means of defense against heat and cold; and it is no longer necessary to restrict the sun baths to 100F., for the organism is then able to withstand the temperature up to 105F. *The patient must be protected against cold and draughts throughout the duration of the treatment.*

The solar treatment is practicable in every country where the sun shines. The therapeutical results will be more or less prompt according to the duration of exposure rendered possible by the local climate and conditions, but they are just as certain.

As to the real cause of the white plague.

The best authors are united and say, the microbes left in the organism by former ailments which develop under certain pathological conditions, are the cause of tuber-

culosis or consumption. However, the dreadful disease is not noticable until the Koch bacillus becomes alive.

Now the great problem is how to prevent, counteract, destroy, or kill the Koch bacillus. According to the best authorities, there would be no White Plague, no tuberculosis, in the world, if the human body or organism were kept from the inflammatory diseases that usually precede tuberculosis or consumption.

The tubercle bacillus.

The famous so-called germ of tuberculosis, which, by the way, is not the cause of the disease, but plays a fatal role in its development, was discovered by Dr. Robert Koch, in 1882.

This germ is approximately one-thousandth of an inch long and one hundred-thousandth of an inch wide. The germ is killed by the action of sunlight. And finally, with these interesting data and reports, it may not be amiss to both, those afflicted with the dreadful disease, and those not yet in its calamitous grip, that in addition to the new treatments presented, fresh air (not cold air, draught, or open windows), wholesome food, avoiding ice cold drinks, ice cream, and other things that chill the stomach; also avoid improper clothing, cold wind or air, chilly rooms, cold sleeping rooms, and last but not least, the practice of cheerfulness, is of great help to those patients. *Directions on Medical treatment* will not be attempted here, except to refer to the importance of preventing cough. One of the best remedies for that is inhalation of Campho-Mentholated Olive oil: R. Camphor gr. X, Menthol gr. X, to one ounce Olive oil. Inhale through the mouth; by means of an Atomizer or Nebulizer, or, take 5 to 10 drops often as required to allay cough.

CHAPTER XCI.

Worms.

The eel or round worms.

The eel or round worms develop from eggs which have entered the digestive tract through contaminated food or water. No intermediate host is required. It was believed that the ova were swallowed by some worm or insect, and in this form taken into the intestinal canal with green vegetables, fruit or drinking water. It occupies the small intestines, but is apt to get into the stomach and even be vomited up; is much more frequently met with in children than in adults, but rarely in infants. The worm is light gray or pinkish in color, resembling the earthworm, five to ten inches in length. These worms rarely exist singly, usually from two to ten are present, but there may be hundreds. When very numerous they coil up and form masses, which may cause intestinal obstruction.

The treatment is their removal with internal remedies. The most active remedy is santonin, which can be obtained at the drug stores in the form of tablets.

Tape-worm.

Tape-worms are usually introduced into the body by the ingestion of some form of food containing larvae, and are of different varieties according to their habitation from which they are derived; in pork, beef, dogs, birds, fish, etc. The larva from pork is most frequent and is seldom found in children before they eat meat; it is raw beef and pork that are mostly infected.

That from dog may be introduced from the hands or the dogs licking the child's mouth.

Treatment.

The remedies are innumerable; parents should not use the advertised remedies for tape-worms, especially not for children, these

are generally injurious to them, and may be to adults. This being so, the safest is to obtain the services of a physician.

Pin worms or seat worms.

Pin worms or seat worms are small, thin, whitish in color, are found in large numbers in the rectum, at the anus, or in the whole length of the large bowel. In infant girls they may creep into the vagina, and may give rise to self-abuse, on account of itching and tickling sensation.

Treatment.

The treatment of main importance is cleanliness, high rectal injection of a tablespoonful of vinegar to a pint of water or inject a tablespoonful of linseed oil, a decoction (tea) of garlic may be used, boil a few garlics in a pint of water, strain and inject. Copious injections of the infusion of quasia, tablespoonful to a pint of water, steep. strain and inject, is one of the best remedies.

CHAPTER XCII.

INFANT INDIGESTION.

IN INFANTS, acute indigestion is seldom limited to either the stomach or the intestines. In one case the disturbance of the stomach is slight and that of the intestines serious, and in another the reverse may be observed. In small infants the intestinal symptoms are the most frequent, and as a rule more severe than those of the stomach.

Cause of indigestion in infants.

Stomach indigestion may be caused by overfeeding, wrong feeding or the diminished digestive power of the stomach, often due to taking cold. Under the first head the most frequent cause is the giving of improper food. In infants it is unfit breast milk; but more often cow's milk, which contains too high per cent of solids, and is not sufficiently diluted.

In older children, the usual causes are indigestible articles of food, as unripe fruit, pastry, sweet stuffs, etc. Overloading of the stomach and swallowing the food without sufficiently masticating it.

Treatment is mostly prevention.

The treatment is to empty the stomach and give it rest. If for any reason this cannot be done, the child may take from its bottle a large amount of warm water, enough to make it vomit and so clean the stomach. Subsequent treatment is chiefly in the regulation of the diet. Everything should be withheld for three or four hours, when barley-water which is one of the best foods at this stage may be given; after twenty-four hours raw beef juice or broth may be tried, but no milk for at least three days.

In nursing infants, the breast should be withheld altogether for twenty-four hours. Drugs are of relatively little value. If the measures mentioned have been promptly used drugs will not often be required.

Intestinal Indigestion.

In intestinal indigestion the causes are essentially the same as in acute stomach indigestion, the use of improper food, overfeeding, sudden change of food or too rich milk; also various conditions affecting the nervous system, such as heat, cold, fatigue, or the onset of any acute disease, as in summer weather; a delicate constitution, feeble digestive power or previous intestinal disorders. The symptoms in infants, if sudden, vomiting, etc., if more gradual, colic pains, bloating, later may have diarrhoea. The important constitutional symptoms are fever and nervous disturbance.

In older children the pain generally precedes the diarrhoea by some hours and is referred to the region of the umblicus. Pain is indicated by a sharp piercing cry, great restlessness, and drawing up of the legs, greenish mucus laden stools; particles of undigested

curds will invariably be found; the result of inflammation of the stomach and intestines.

Treatment—Is the same in general, as is in the case of stomach indigestion, i. e., first empty the bowels; secondly, secure to the patient, especially to the digestive organs, as complete rest as possible; withhold all food, except perhaps weak barley-water, for twelve to forty-eight hours, and give an injection of saline—Epsom Salts, with Soda and Salt. This will allay fever and clean out the colon and will not burden the little stomach.

Acute Gastroenteritis (Inflammation of the stomach and intestines.

In infancy there is repeated vomiting of food and mucus, having a sour or feted odor. In a few days the stools become feted, greenish and streaked with mucus. Cutting teeth and overfeeding are the most frequent causes; impure milk, dirty bottles or nipples, make a close second. Feeding foods, when the child is unable to digest them, also is a frequent cause; cold feet, taking cold, in general causes indigestion and billiousness.

Treatment.

The first step is to stop all food, and wash out the lower bowel with plain water; give a 1/10 gr. tablet calomel every half hour four or five times, then in one or two hours, a saline laxative may be administered in sweetened warm water.

If vomiting continues give administration of salines in small doses by the mouth, then resort to administering a saline solution by the rectum,—½ to 1 teaspoonful of Epsom Salts to two ounces of warm water, inject with an Infant syringe; may repeat that in one hour if rejected, or two to three times a day if there is tenderness in the abdomen, that will reduce the fever and inflammation.

Food.

With infants begin with small feedings of barley-water, later on with modified milk, best with small quantity of milk in bar-

ley-water, slowly increase as appetite increases. With older children may use the same food or change to oatmeal or rice-water, beef broth, broth off of beef-vegetable soup, egg-albumen, etc., until the stomach becomes tolerant to normal food.

Acute Anterior Poliomelitis.

(Infantile Spinal Paralysis)

In an acute infectious disease, occurring chiefly in young children, characterized anatomically by inflammation of the gray matter of the spinal cord with distention of the nerve-cells in the anterior horn, and manifested clinically by febrile disturbances and rapid atrophic paralysis of various muscles.

The disease may be speratic or epidemic.

It is more prevalent in cold than warm countries.

Most casese occur in the summer months, and during the extreme heat. Children below the age of six years are especially susceptible, but adults may be attacked.

It has been observed that the increase and decrease in cases vary according to the extremity of heat, and decrease of temperature, indicating that in the main, it is a Thermal disease, its onset depending on infection from the alimentary canal, due to the extreme heat, causing indigestion and putrefaction of the contents of the stomach and bowels.

Symptoms. The onset is marked by moderate fever, restlessness, headache, pain in the back and limbs, and muscular soreness. There may be vomiting or diarrhea, and occasionally convulsions occur. The mind is generally clear. In the course of a day or two a flacid paralysis makes its appearance, all four extremities and the trunk may be involved.

Prognosis. Unless the initial symptoms are very severe or the muscles of respiration are effected, the prognosis (prospects) as to life is good.

In all cases much of the paralysis disappears and occasionally the improvement is so marked that the usefulness of the members is not seriously impared.

Treatment. In the main, is prevention: Strict attention to health; keep the child out of the sun, in a well ventilated room or rooms, take him out doors, in the shade during part of the day.

Proper diet of highly nutritious food, and little every three hours is preferable to full meals. Milk is usually well born, but soon as feverish conditions appear, give it only with gruel of some kind, or with barley-water, etc.

The bowels should have attention; enema of warm alkaline solutions are best suited. See the salts, soda and salt prescription for fever cases in other parts of this book. Keep the bowels well open, and in case of fever, vomiting, etc., withdraw all solid foods, milk included; milk at this stage will not be digested, but form tough curds and more toxines.

For general treatment, the case must be relegated to the family physician.

CHAPTER XCIII.

Cholera Infantum (Summer Diarrhoea)

SO PREVALENT in summer, occurs regularly each season often as epidemic in most large cities of the temperate zone. This form of diarrhea may follow an attack of acute indigestion in which it often has its beginning. Among the causes are to be mentioned first, those which give rise to acute indigestion, and secondly the age, surroundings, food and methods of feeding. The most striking thing about these cases is their prevalence during hot weather; hence this feature demands attention. While all varieties of diarrhea are frequent in summer, it is cholera infantum that is especially prevalent.

The cause of summer diarrhea.

It is now generally conceded that the cause of summer diarrhea is due to acid ferments from undigested foods. And its prevalence during the heated season may be ascribed to lower digestive powers, and that the action of heat on the intestinal bacteria produce these acid intoxications.

Treatment should be to correct the cause.

The treatment then should be to correct the cause, regulate the diet, and keep the infant out of the hot sun; remove all clothes possible, give them easily digested food, keep the patient (and for that reason when well), reasonably cool, but give no ice water, but simply cool, best sterile water to drink.

Medical treatment.

Medical treatment, one of the best, a dose of Castor oil, repeat every one, two or three days, or as required. Irrigation of the bowel is advisable by injecting warm water into the rectum, leave off all solid foods.

Cholera morbus, its prevention and treatment.

Cholera morbus is a severe form of acute catarrhal inflammation of the stomach and bowels accompanied by choleraic symptoms, occurs chiefly in summer and is usually traceable to eating unripe fruit, or to chilling by

cold drinks. It is seen most frequently in young adults.

Prevention—Guard against irritable and indigestible foods, such as unripe fruits, sudden change of temperature, cold drinks, etc.

Treatment—Quarter to half grain doses of calomel every half hour three or four times, follow with a dose of Castor oil, hot fomentations to the abdomen, if not speedily relieved, call a physician.

CHAPTER XCIV.

PROLAPSUS ANI.

Prolapse of the rectum.

PROLAPSE of the rectal tissue is most common in children during the second and third years. Its frequency in early life is partly due to the lack of support furnished the ani muscles, and when the rectal fat is scarce. The exciting cause may be anything which provokes severe and prolonged straining at stool.

Treatment.

The treatment is to reduce the protruding tissue (rectum) which in most cases is easily done by laying the child upon its face across the lap, anointing the protrusion with olive oil, and making gentle pressure upon the tumor with oiled fingers. After reduction the child should be quiet, lying down for at least one hour. Where the tumor tends to come down with every stool, special attention should be given at this time. If an infant, the bowels should move while the child lies upon its back, and during the defecation the buttocks should be pressed together by a nurse. Older children should use an inclined seat placed at an angle of forty-five degrees, and should never sit upon a low chair, or assume any position in which straining is easy. After defecation the patient should lie down for at least half an hour. Never allow the bowels to become constipated, if they are, precede evacuation by an injection of a little oil or warm water.

Regulate the Bowels.

By foming regular habits.

Begin with the young child by placing it on his chair under which a little chamber has been placed after the first meal or nursing in the morning, after the midday meal, and after the evening meal—say at 7 A. M., 1 P. M., and 7 P. M. That will soon induce a habit of three bowel movements a day—the last shortly before putting the child to sleep.

Later in life the child should be taught to go to stool at about the same hours. If this is kept up he will acquire a habit of going to stool before retiring, no matter at what time of the evening.

Parents should teach the child not to strain; if constipated a small enema of warm water will start things.

Many cases of chronic constipation can be cured by adopting the habit of timing the defecation of the bowel properly: on retiring. It may be easily learned. No straining is necessary; only a sufficient degree of concentration on the task on hand. The time just before going to bed is conducive of deliberate action; there is no hurry, no train or car to be caught; nobody waiting for you—except the bed.

In refractory cases, a small (not more than one pint) enema of water may be taken in the sitting posture (the only condition in which an enema should be taken in that position!), to start things.

This course being persistently followed just before going to bed will eventually cultivate a habit of a bowel evacuation before retiring, no matter at what time of the evening or night.

The habit may not always be acquired easily; it may take time.

Idiopathic Epilepsy (Falling sickness).

Is a chronic disease of the nervous system, characterized by periodical attacks of unconsciousness or disturbed consciousness, with or without convulsions.

Book after book has been written upon this protean disease, and in this work we must confine ourselves to some of the new ideas relative to the treatment that has proven successful more as a cure, not only in our hands, but those of other physicians throughout the country.

Epilepsy due to toxemia.

It would be impossible to present here fully the reason why it is probable that epilepsey is distinctly a manifestation of some systematic toxemia. It is, however, admitted that any treatment directed against epileptic condition itself is foredoomed to failure; and on the contrary, it has of recent years been demonstrated that convulsions and other phenomena of a distinctly epileptic character may be put an end to, by some very simple remedial measures: such as the correction of stomach disorders, disorders of the sexual organs, etc.

It is also well known that epilepsy often begins during the period of teething, severe cases of infectious fevers, summer complaint, fright or shock. In children with stomach disorders, which cause spasms due to toxic conditions brought on from indigestion.

Those spasmodic conditions are in many cases forerunners of what later in life develops epilepsy; if not corrected; and it is in these cases where the laity can do the most for prevention of epilepsy. Spasms should be prevented by the timely care of the diet and the bowels; also heat in summer and cold in winter.

Treatment.

In so far as the laity is concerned, the foregoing remarks, as to the disease, and the causes of the disease, indicates that the

laity can do much, especially for children, to prevent epilepsy—prevent spasms by regulating the diet, correct indigestion, regulate the bowels, prevent chilling or overeating. The medical treatment of epilepsy must be relegated to the physician.

CHAPTER XCV.

Headache in Children.

Headache is a symptom of disease or disorder.

HEADACHES are not common in little children except in connection with disease of the brain or membranes of the brain and spinal cord; in older children they occur from causes similar to those seen in adults. The most frequent headaches may be grouped in the following classes:

1st. *Toxic headaches;* toxins are poisons resulting from uremia, carbonic gas in poorly ventilated rooms, malaria, indigestion, over-eating and eating indigestible foods, causing auto-toxemia or ptomain poisoning in some form.

2nd. Headaches from anemia and malnutrition, are most frequent in girls from ten to fourteen years of age. Some are intellectually bright, and have been crowded in their school work, others dull and learn with difficulty, and in consequence worry over their task until their health becomes undermined. They sleep badly, lose appetite, and often become choreic. The anemia may be either the cause or the result of the symptoms.

3rd. Headache of nervous origin may occur in children who are highly neurotic (nervous) from inheritance or from surroundings, and in those who are subjects of epilepsy or hysteria they may be symptoms of organic disease of the brain, such as tumor, tuberculosis, or syphilis, meningitis. True facial neuralgia is rare in childhood except from decayed teeth.

4th. Headaches due to disease of organs of special senses of the eyes, ears, nose or throat.

5th. Disturbances of the genital tract are rare causes of headache in children, but this may be the case in girls

about the time of puberty, especially where menstruation is delayed or difficult.

The treatment consists of removal of the cause.

The only successful treatment is that which aims towards the removal of the cause. Headache powders and tablets advertised for headache should not be used as a cure. If necessary for temporary relief one or two doses may not be injurious, but then the cause should be ascertained and treated or removed.

If it is due to over-eating or constipation that may be removed by laxatives and attention to diet. Regulation of the bowels, so that they are evacuated before bed time may secure good sleep. Also in some instances, a light supper is wholesome.

Cold application to the head, when.

Cold application to the head may do well in case the face is flushed, indicating fever, but when the face is pale, and the head is cool there should be no cold applications put to the head.

CHAPTER XCVI.

Infantile and Children's Convulsions.

UNDER this head are included attacks of acute transient nervous disturbances, characterized by involuntary rhythmical spasms of the muscles, either of the face, trunk, or extremities, or all of them, usually accompanied by loss of consciousness and followed by stupor.

The cause of convulsions.

The exciting causes include many diseased conditions, among which disturbances of digestion are first, where the susceptibility is great, the exciting cause may be trivial, dentition (teething), worms, indigestible food, etc. Convulsions in older children may be due to the same causes, but include epilepsy, uremia, etc., but convulsions in

adults occurring suddenly, with loss of consciousness are usually due to autotoxemia, uremia, epilepsy or apoplexy.

Treatment by the laity.

The treatment of infantile convulsions, by the laity, is of first importance, because the parents and the nurse are the first at hand, and a simple application may save much harm to the child.

The doctor may be called by some one present while the parents make use of handy remedies, and when the child comes out of the spell the physician can direct prevention of future attacks. In convulsion of the infant it is wise in every case to irrigate the bowels with warm water, or a half ounce of glycerine in two to four ounces of warm water (inject into the rectum). If the spasm is severe fill a small tub, large dish or bowl with hot water, warm as your elbow can comfortably bear, sit the child into that, holding the head in the palm of the left hand, place a towel over the part not in the water, and with a cloth or diaper in one hand splash the warm water over that part of the body which is not under water. Keeping the water hot by adding hot water must be careful not scald the child with the hot water so added.

Soon as the convulsions have ceased, it may be wrapped in a warm blanket and placed in its bed. Should the spasms recur before medical remedies take effect the hot water bath may be repeated.

The stomach and bowels should be emptied, and if there is high temperature it may be bathed with tepid water, and cold pack to the head, the cold pack must not be left on after the head becomes cool.

After convulsions the child should be kept quiet in a darkened room.

Secondary or future attacks are to be prevented by careful feeding, and by improving general nutrition, at the physician's directions.

CHAPTER XCVII.

Care of the Teeth.

WE KNOW for a certainty, that food insufficiently masticated, cannot be properly digested.

That then indicates the need of special care of the teeth from the beginning of teething and at all ages.

Every child should have dental as well as medical attention. His or her teeth should be freed from every particle of decaying material that may lodge in the interstices of the teeth.

After eating, and especially before going to sleep the teeth should be freed from every particle of food, the teeth cleansed, and the mouth rinsed.

Brush the teeth up and down.

The proper way to use the tooth brush is to place it against the teeth, then brush *UP and DOWN* with a rotating motion in the direction the teeth grow, brushing the upper teeth downward, and the lower upward.

This will prove awkward at first, but keep at it and see how easily you acquire the right motion.

It is simply wonderful to note how quickly and thoroughly the particles of food between the teeth will be removed.

Repeat this process several times both on the inner, and outer surfaces of the teeth, then brush in all directions across the grinding surfaces.

It is well known that a septic or disorganized masticatory apparatus is a hot-bed for the development of all sorts of disease germs. Also that the various structures of the mouth provide an open door for the absorption into the blood and lymph, these health destroying agents, and so develop toxic conditions of the various structures of the mouth and accessories.

The solution is easy: Clean the mouth and the teeth and keep them clean, remembering—"A clean tooth never decays".

PREVENTION AND TREATMENT OF PYORRHEA.

(Discharge of pus, purulent inflammation and bleeding gums). Have your druggist prepare the following tooth-powder:

R. Precipitated Carbonate of Lime....oz. II
Carbonate of Magnesium.....dr. 1
Borax, Powdered .....dr. IV
Papain, Powdered .....dr. II
Oil of Cloves .....
Oil of Eucalyptus .....
Oil of Casia, of each, Minims.....XXX—Mix

Directions. Apply once or twice daily with a soft brush or dampened finger and apply the powder directly to the gums and massage well. After a while the teeth may be wrinsed with clear water.

FOR TOOTH-ACHE.

R. Olive Oil .....oz. I
Camphor, Powdered .....gr. X
Menthol, Powdered .....gr. X—Mix

Directions: Saturate a pledget of cotton with ten drops of this mixture of oil and apply directly to gums, and hold it between the gum and the cheek.

These are perhaps two of the most important prescriptions for the health and comfort of the family. Begin the use of it in early childhood.

CHAPTER XCVIII.

Habitual Constipation.

DEFINITION—Is infrequent or difficult evacuation of the feces.

The chief causes are:

1st. Habitual neglect of answering nature's calls.

2nd. Many of the general diseases that lessen the intestinal secretions or inhibit peristalsis, such as acute fevers, anemia, diabetes, nervousness, etc.

3rd. Many diseases of the digestive tract; chronic inflammation of the stomach and bowels, torpor (improper action) of the liver, jaundice, chronic intestinal catarrh, etc.

Purgatives are rarely indicated. The cause should be sought for and corrected.

Frequently, abundant exercise, regulated diet, and formation of proper habits prove curative.

The removal of the cause is a matter of first importance.

Cathartics should be avoided, if possible. In some cases the activity of the bowels is restored by repeated daily attempts at defecation at some special hour, say after breakfast and after supper.

Abdominal massage, especially kneading the abdomen in the direction of the colon (from the right groin up, to under the ribs, then across following the crest of the chest, and then down the left side to the left groin), is often quite effectual. Unless the state of digestion offers a contraindication, such laxative articles of food as green vegetables, oatmeal, whole-wheat bread, corn meal, oils, and cooked fruits should be used.

Water drinking should be encouraged; cool not cold water before meals may suffice. A glass of water two hours after meals is a wholesome practice for any person.

With some people a ripe orange before meals acts as magic. In infants a teaspoonful of ripe, sweet orange juice one to three times a day will regulate the infant's bowels.

With some adults, saline laxatives (sodium phosphate or Rochelle salts), in small doses, well diluted with water act well. At any rate one should not neglect his bowels.

When one's bowels have not acted during the day, a laxative should be taken so as to act after the next meal.

With some it is well in such cases to take an enema before going to bed, and a laxative, so that the bowels will act the next morning.

The enema should consist of warm water, or a small quantity of common salt may be added, two teaspoonfuls to the quart of warm water. Soap and glycerine, as a rule, are too irritant, and wholly uncalled for.

Mineral waters, like Friedrichshall, Hunyadi Janos, etc., may be used to advantage.

In obstinate cases vegetable cathartics are usually necessary. The mild ones should be tried first, or in small doses, and with these considerable care should be exercised lest the patient comes to rely upon drugs to the exclusion of the hygienic and dietetic measures above indicated.

The field of usefulness for enemas is really limited, but it is an excellent method of softening up indurated feces in the rectum and of service in emergency cases when patients have rebellious stomachs, and in some cases of gas accumulation in the large bowel.

Its action, though mild, is liable to give some pain and therefore must be given slowly, governing the flow by the feelings of the patient.

To give regularly large quantities, as has been the habit of some, is decidedly harmful.

The common method of using soap is to be condemned, for soaps are strongly irritating, since they are formed by the action of an alkali on fats or oils.

For impacted feces, if the accumulation is higher up, allow the enema to pass in very slowly and retain over night.

Ordinarily an adult should not take more than one quart of water at one time; there is some danger of over dilating the bowel.

CHAPTER XCIX.

Acute Bronchitis.

ACUTE bronchitis (inflammation of the bronchial tubes), the every-day "cold," is a common affection among children, especially during their first dentition (teething), and more or less throughout the school age.

Much of this disease among children may be attributed to exposure to cold and wet, sitting or standing in draft. Among school children who rising in the morning, after a hurried breakfast (half-masticated), leaves the house for school. Noon arrives, rushes out precipitately in whatever climatic conditions prevail locally. Cold or wet once more on arriving at home, sits down to a heavy meal, which is rapidly devoured and then again facing the elements, hurries back to school.

Two or more hours of study and "drying-out," and then again the child hastens from a hot room into the outer air. Another wetting perhaps going home and then an evening spent in the unhealthy air of the gas-lit flat, etc.

Among older children and adults acute bronchitis may be attributed to cold, damp climate, changeable weather; occupations that necessitate confinement or inhalation of

irritating dusts or vapors; those who are of a gouty diathesis (disposition); and chronic heart disease, are predisposing factors.

Exposure to cold and wet, particularly when the body is overheated, or the inhalation of irritating gases or dusts are exciting causes. Acute bronchitis is also an associated condition in certain infectious diseases, especially measles, whooping cough, typhoid fever, and influenza.

Treatment—Of children, even in simple cases (the "common cold"), the first thing to do is to improve the child's surroundings as much as possible. See that it is kept in a well-aired room at 70 to 72 degrees F., and avoid the danger of sudden changes. Give the child light, easily digestible, but nutritious food, "a little often" being preferred to three full meals a day usually deemed sufficient.

Give the child a sponge bath (in a warm room) with a solution of magnesium sulphate, one ounce to the quart of water at 100 degrees F., over the upper thorax (chest) and throat apply a compress of old linen or lint wrung out of this solution and, over this again, apply a flannel bandage.

Change every four hours. The sponging should be repeated daily for three or four days.

If there is any doubt as to the patient being exposed to draft, put him to bed.

The child should have an active laxative; some saline preparation (Magnesium sulphate), or Castor oil.

A gargle of listerine may do well. Keep the child warm, allow no cold drinks.

Should ordinary home remedies fail or if there are signs of increase in severity the family physician should be consulted.

If the patient is weak or old, he should be confined to his room or even to bed; the atmosphere of the room should be kept warm and moist.

Hot foot bath, hot lemonade or hot water; no cold drinks nor cold food are to be permitted.

The bowels should be kept regularly open by the aid of mild laxatives; the salines are well suited, especially in case of much fever, the saline laxatives are of special service.

In the early stages, when there is no secretion ("when the cough is tight"), some expectorant is indicated.

The treatments suggested here are for simple cases and as preventives against complications; in severe and complicated cases the patient should be attended by a physician without delay. For general treatment, and cases in which there is much fever, see treatment for croupous pneumonia to which this complaint is closely allied.

CHAPTER C.

Broncho-Pneumonia (Other Names Are—Capillary Bronchitis, Catarrhal Pneumonia, Lobular Pneumonia).

BRONCHO-PNEUMONIA, is an inflammation of the terminal bronchioles and air-vesicles. The most dreaded disease of the cold months. It is most frequently observed in the very young and the old. Children under six years of age are most frequent patients.

It is a common sequel of the specific fevers, affections following and caused by an attack of disease, especially of measles, influenza, diphtheria and whooping-cough, in infants and debilitated subjects of any age; it may occur as a primary affection, the result of exposure to cold, etc.

Another group of cases result from the aspiration (inhalation) of infectious material or particles of food into the smaller bronchi (aspiration or deglutition pneumonia). This accident is liable to occur whenever

the sensibility of the larynx is benumbed, as in apoplexy, bulbar palsy or uremia.

Cancer of the throat and operation on the upper air passages also favor its occurrence.

The course is erratic (roving). One part of the lung may clear up and another become involved; one lung may suffer or both; this is usual and hemorrhage may occur.

When one side is affected, it usually will prove to be the right apex.

In broncho-pneumonia the bronchi are filled, in lobar pneumonia they are not, the treatment, however, is practically the same as in lobar pneumonia.

Symptoms—The symptoms are often masked by the primary disease. The onset is usually gradual, and more or less characterized by prostration, cough and fever.

The dyspnea (difficult breathing) is marked, and the respirations are rapid; the cough is painful and accompanied by muco purulent expectoration (sputo mixed with pus), that is rarely blood-streaked.

The face is usually pale and anxious, and the lips blue.

Treatment is along the same line as that of lobar pneumonia.

Much can be done by careful management in preventing bronchitis from gaining access to the smaller bronchi.

In this, and all other forms of pneumonia, the great problem is, "prevention of taking cold", the patient is apt to sweat, roll over, uncover parts of the body—shoulder, back, etc., and so get chilled. The next is, he begs for cold drink; cold drink, or cold of any kind entering the stomach produces more tough mucus, more billiousness, more fever and cough. The treatment should be at the hands of the family physician.

(See treatment for Croupous Pneumonia.)

CHAPTER CI.

Croupous Pneumonia or (Lobar Pneumonia, Pneumonitis, Lung Fever).

CROUPOUS pneumonia is almost invariably an acute primary disease, coming on with startling suddenness after exposure.

After the second year of age, this is the most common form and affects the robust and weakly impartially.

In some parts of the country it is known as "lung fever" and sometimes is termed simply "inflammation of the lungs." One lobe or part of a lobe may be involved; in some cases both lungs are affected (double pneumonia).

Not uncommonly, just as resolution (subsidence of inflammation) is beginning on the side first affected, the other lung congests.

When the disease is bilateral (double), the prognosis must be guarded and great care must be taken to keep the patient from rising; sudden death has followed sitting up in bed even.

Symptoms—The disease usually begins with a decided chill and a sharp pain in the side, followed by a rapid rise in temperature. The maximum temperature (104-105 degrees F.), is often attained within twenty-four hours and generally continues high, with slight remissions, for a period of from five to ten days, when it falls by crisis (suddenly), frequently reaching the normal within twenty-four hours.

In protracted cases the temperature not rarely falls by lysis (gradually).

There is marked dyspnea (difficult breathing), the respirations are shallow and rapid; cough is a prominent symptom; at first it is short and dry, but later it is

accompanied by rusty translucent (somewhat transparent) and tenacious sputa. The face is flushed, the lips are cyanosed (blue) and often the seat of herpetic eruption (fever blisters); the tongue is heavily firred; the bowels constipated; the urine scanty, and high colored. In severe cases delirium is rarely absent.

Treatment—This means everything must be carefully thought out. First and foremost, clean out the alimentary tract (the bowels), and keep it clean. Even before making a diagnosis begin to give a laxative. Begin with small doses of Calomel, ½ gr. tablet every half hour till six doses have been given. Then wait one hour and give small doses of some recognized saline every half hour until the bowels move three or four times. (Epsom salts, in teaspoon doses) in glass of hot water every half hour, three of four times makes a most excellent remedy in such cases; to children in proportion to age. A saline laxative, morning and evening, to effect one stool twice daily is an excellent way to cool the blood, and keep down the fever without affecting the heart.

The sick-room should be well ventilated, but avoid draught by opening the window or transom opposite from where the wind comes; do not allow the wind to strike the patient. Keep the sick-room at even temperature of from 70 to 75° F. Protect the shoulders, chest an darms with a sweater or jacket. Keep the patient warm and out of draught, and send for the physician soon as you suspect it is a case of pneumonia. For the thirst give plain sterilized water that has been boiled—preferably hot. Hot water will quench thirst, reduce fever and help quiet the cough. Cold water feels good to the palate, seems refreshing, but tends to create more tenacious mucus (slime) which causes more fever, cough and perhaps delirium. Cold water cools at first, then reacts in more fever and thirst.

At times it becomes imperative to let the patient have some cool water to drink, because he becomes impatient and irritable, then cool water in small sips should be allowed, but no ice, nor ice cold water.

A little attention or study of the results will soon convince the patient that the hot water is best for him. The patient should have all the hot water he wants, that will dilute the mucus in the stomach, acts as a modifier, aids elimination of the poisonous fluids and helps to expel waste, while cold water will chill the patient, creates more mucus, and may hinder the expulsion of waste, at least for a time. The accumulation of waste (feverish material) is the cause of high fever and delirium in most all fever cases, and so in pneumonia.

The uncovering of an arm, shoulder, leg or other part of the body may cause him to take fresh cold.

The bed covering should be sufficient to keep the patient warm, but, if possible, avoid sweating. Damp clothes should be removed and replaced with dry clothes after warming them.

A sweat-bath may be of benefit, but only if chilling can be avoided while making the changes.

When the patient gets too warm lighten the bed-covering by removing the top cover. Never uncover any part of the patient by removing all the covers at one time from any part of the patient.

The foregoing instructions are for adults,—children should be treated along the same lines considering age and conditions.

The medication, as a rule, must be relegated to the attending physician.

Diet—This is important. The food must be of fluid or semi-fluid: barley water, thin, clear broths and bouilon are alone allowable at first.

Fruit juices in water may be used with safety instead of barley water, which later however acts potently upon the kidneys, slightly sweetened and flavored with lemon or a pinch of salt.

After the crisis, weak cocoa in small quantities may be given with soda crackers or swieback, gruels with milk, etc., weak eggnog is an excellent adjuvant.

CHAPTER CII.

MASSAGE.

DEFINITION—Massage consists of mechanical movements, best executed by the hands of the operator, affecting not only the skin, but also the deeper structures of the body.

Massage is an instinctive art; instinct tells one to hold, press, or rub a painful part of his body. Hence, every one who has arrived at the age of sense or reasoning, instinctively, in a manner, makes use of massage.

Massage is a practice in medicine as old as the practice of medicine itself.

History records it as an art, before the Christian era.

Herodotus, 484 B. C. called by Cicero, "the Father of History." "In a passage from Herodotus we are informed that after having poured upon the body a greasy mixture, each part ought to be rubbed, passing the hands from above downward. At the commencement the friction ought to be gentle and slow, then it should become rapid and accompanied with pressure, whilst towards the end friction should again become gentle."

From the aphorisms of Hippocrates, 400 to 380 B. C. on this subject, it is said—"The physician must be experienced in many things, but assuredly also in rubbing."

So Galen, A. D. 130-200, the most learned physician and the most accomplished man of his age, whose authority in medical matters was regarded in Europe as almost supreme for a thousand years, recommended friction in a great number of diseases, generally as an auxiliary to other means.

Innumerable quotations in history show that massage was a therapeutic agent from remote antiquity.

As with other branches of medicine massage was placed on more scientific basis by men like Dr. Mezger of Amsterdam, who in 1876 was accorded credit for having improved the method of applying massage in a physiological manner.

And here we may mention one of our prominent physicians, the famous Dr. S. Weir Mitchell, of Philadelphia, Pa., who did so much to systematize the methods of massage and bring the means of therapeutics to a scientific basis. Dr. S. Weir Mitchell died January 4, 1914.

Modes of action—Massage acts in the following ways: (a) it quickens the flow of fluids (blood, lymph, chyle and others); (b) it increases secretion and excretion; (c) it excites muscular action.

Methods—The movements in massage are of several kinds: (1) Stroking or effleurage; (2) Pressure or petrissage; (3) Percussion or tapotement; (4) Vibration; (5) Passive movements; (6) Active or Swedish movements; (7) Medical or gymnastics.

Stroking is performed by lightly drawing the hand in one direction over the surface of the part; on the head from the vertex (top or crown), on the spine from the neck, downwards; on the trunk (the back), from the spine outward and with a to-and-fro movement; on the chest use inward, downward and outward curves; the abdomen, may be manipulated by stroking from a line below the

umbilicus and above the pubes to the right groin up to the ribs and across and downward to the left groin to the point of beginning, or a curve stroking around the umbilicus from right to left.

Massage for constipation when obstinate, a good plan is to commence the manipulation of the abdomen over the left venter (belly) of the ilium (hip bone) and work so as to push the contents of descending colon (large intestine) towards the rectum; then begin (again a little farther backward and upward along the colon, and work in the same direction as before; attempting to unload the large intestine, and so on until the whole colon is traversed (treated) back to the ileo-cecal valve (at the right groin), and again from there to the sigmoid flexure of the colon (the point of beginning at the left groin).

Those who are not familiar with the course of the colon may do well by simply kneading the bowel as nearly as they can in conformity with the directions here given; on the limbs (arms, hands, legs and feet), from the extremities towards the trunk.

When friction is employed, greater pressure is made, and the hand is moved to-and-fro.

Pressure (squeezing, kneading, rolling, etc.). Pressure and relaxation should be alternate and rhythmical, simulating natural muscular action.

During the pressure the veins, capillaries, lymphactic ducts, and lymph-spaces are emptied and the valves in the vessels preventing the return of the expelled fluids, room is made for a fresh supply.

Percussion (tapping, beating, pounding and others), causes muscular contraction.

Vibration acts in a similar manner as does percussion.

Passive movements—All normal movements of the joints are fully executed by the operator, the will of the patient being in abeyance (neither resists nor assists the operator).

The synovia (the viscid fluid of the joint-cavities) is

increased, if scanty—absorbed, if in excess, deposits around the joints are removed, and nutrition is promoted.

Active or Swedish movements are performed with the combined help of the patient and operator.

The will of the patient is concentrated on the muscles under treatment. The patient is directed to cause a muscle to act, and the operator resists the movement, employing slightly less force.

When the muscle has fully contracted, the operator employs more force, while the patient, diminishing but not ceasing his resistance, allows the part to be brought back to its original position. This is repeated a suitable number of times, but never so as to cause muscular exhaustion.

Medical gymnastics have for their object the bringing into action those muscles which are seldom employed, or which, for some special reason, require strengthening.

Uses—The maladies, both medical and surgical, for which these therapeutic agents have been employed with success are very numerous.

It must suffice to mention the following:

Atrophy (wasting or diminishing) of muscles, bruises and contusions, constipation, chronic rheumatism, infantile paralysis, locomotor ataxia, muscular cramps, neuralgia, pain and swelling due to colds, congestions, etc., sprains, wry-neck, writer's cramps, etc.

Massage is an art in which, to be proficient, one must not only be learned, but practiced. But most any person can by careful study acquire a rudimentary knowledge of the art so that they can help themselves or those about them in many cases.

In the foregoing explanations of the various kinds of massage, the main points which are to be attained by massage are already given, and owing to the limited space in this book, we shall not attempt to write a full "thesis" on massage, but hope to serve the reader much

by mentioning the main principles to be observed by the masseur.

The following and similar cases may be treated by the laity with much benefit, and with no danger of injury to the patient:

Atrophy or wasting of muscles may be benefited by almost any kind of rubbing, squeezing, etc., being careful not to bruise the tissue.

Bruises of any kind or nature may be treated at the beginning with gentle pressure, compresses or bandage.

Massage may be applied if the bruise is slight, if by such means the blood may be absorbed. This followed by a compress or bandage will prevent swelling. A hot moist compress following the gentle massage will prevent ecchymosis (extravasation of blood) or discoloring of the parts due to it.

Constipation may be relieved in selected cases by kneading the bowels; massage or kneading the bowels stimulates peristalsis—a worm-like movement by which the alimentary canal propels its contents; for manipulations see instruction on Massaging the Abdomen under "Stroking."

Chronic muscular rheumatism, infantile paralysis, locomotor ataxia, muscular cramps, neuralgia, pain due to cold, sluggish circulation, wry-neck, writer's cramps and similar ailments yield kindly to most forms of massage, and the laity takes no risk in undertaking such treatment with average caution.

Circumscribed area—The manipulation or massage of any circumscribed area should be begun from the distal end or outer edge of the painful part.

When for example, there is a pain in the calf of the leg, massage should be begun above the point of pain and gradually work up to and including the painful spot. When there is a pain in a joint, do not massage the joint first, but above and below the affected point, and gradually work up to and over the painful area. Most

parts that are swollen are best treated by gentle compression, and then firm but smooth (even) bandage.

For example, a sprained joint, with effusion (escape of fluid into the part-swelling), should first be treated by compression with the palms of the hands, so that the fluid is slowly pressed back into the joint cavity; so reduce the pain and swelling; then, after the swelling has been reduced, apply a firm well fitted bandage.

If properly treated, early and along these lines, a sprained ankle or wrist, there will be little or no pain.

Caution—Not every pain nor swelling is to be treated by massage.

There are cases in which massage is injurious; some cases of acute inflammation, effusions of injurious materials which might be spread into the circulation.

Certain gatherings (abscesses, etc.), should not be massaged, because the poisons so circumscribed might be pressed into the blood or lymph circulation.

New-growths, tumors, etc., should not be massaged because this may stimulate their growth or cause their spread to other parts of the body.

For these and other good reasons one should not undertake to massage certain conditions without the advice of a physician.

Even the so-called "Osteopaths" should not treat certain cases unless they are absolutely sure that it is a case where massage is proper.

Only a physician is competent to decide in certain cases, whether or not massage is indicated.

And no masseur, no matter what his reputation, should undertake to treat disease without the advice of a competent physician.

If any one surmises that he or she needs massage, or so-called osteopathic treatment, they should first obtain the advice of his or her physician, who then will send them to a masseur with instruction as to the kind and extent of such treatment to be administered.

MASTURBATION (SELF-ABUSE) IN CHILDREN.

THIS is not uncommon even in infancy. Many cases have been observed during the first year. It is seen in children of all ages and in both sexes. In infancy and young children, it is claimed by some authors, that in infancy it is much more frequent in girls than in boys. This may be accounted for because of lack of cleanliness of the parts.

Acquired through companionship.

In older children it is most frequently acquired from companions or may be induced by irritations that cause the child to handle the parts; also anything that causes erections; among these are vulvo-vaginal inflammation, eczema, thread-worms, tight clothing and titillations by the nurse or even parents. This is done without thought by tickling the parts to quiet the child.

In older children the habit is practiced more by boys than girls.

The results in boys are an increase in size and sensitiveness of the organ; in girls vaginal inflammation; in both, emaciation, anemia, flabby muscles, nervous phenomena, and bodily and mental retardation.

Treatment — prevent irritation and watchfulness.

In the treatment, drugs are of no services, moral influence, healthy exercise, nonstimulating diet, baths, a hard mattress, light bed covering, and continual surveillance are the remedies.

In some cases punishment and application of escharotics to the parts will be necessary.

Parents should be on the lookout for such habits and practices from early childhood, they should follow up every suspicious act of the child, this without being noticed by the child.

In boys the prepuce should be trained back over the gland penis, and cleansed at least as often as he is bathed.

The girl's genitals should be gently, but carefully cleansed, to prevent itching.

CHAPTER CIII.

Anemia in Children (Deficient Quantity or Quality of Blood).

THIS consists in impoverishment of the blood, especially the red corpuscles. The cause and important factors are an insufficient production of blood in consequence of deficient food, or interference with the absorption of food, and secondly, an increased drain or destruction of blood, as in exhausting diseases.

Infancy and childhood, are themselves strong predisposing causes of anemia, on account of the great demands upon the blood in the rapid growth of the body.

The cause. In certain cases anemia may be congenital (hereditary), as in infants born of delicate or anemic parents, or where the mother during pregnancy has suffered from some serious disease, such as syphilis or inflammation of the kidneys, etc. Acquired anemia may come at any period of infancy or childhood. The cause may be loss of blood, as in hemorrhage of the newly born, nose-bleed, scurvy, chronic inflammation of the kidneys, chronic diarrhea, indigestion, etc.

Treatment. The treatment consists in finding the cause, and treat the primary conditions upon which the anemia depends. This may require the services of the physician, but the parents often are aware of some of these conditions, and can prevent the onset by observing natural rules of diet, clothing, exercise, rest, etc.

CHAPTER CIII½.

Prevention and Treatment of Exophtholmic Goiter. (Grave's Disease; Parry's Disease; Basedow's Disease.)

Definition. Goiter is a disease characterized by enlargement of the thyroid gland, marked prominence of the eyeballs, tackycardia (excessive rapidity of the heart's action), and muscular tremors.

Cause of the disease. The disease most frequently develops in the third or fourth decade, but also has its beginning during school age. Woman are much more often afflicted than men. Heredity, emotional excitement, and mental strain, are predisposing factors.

The development of morbid conditions, or of the disease, is still undetermined. The disease is probably due to excessive functional activity of the thyroid gland (hyperthyroidism). The essential changes in the gland are increase of cells and fibrous tissue with loss of colloid—a gluelike substance.

Symptoms. The symptoms of goiter are so well known and easily recognized that it is needless to give space to a description. It may be found in schools, and in the homes.

In its early stages goiter causes no particular trouble, but as it gains in size circulatory and resporatory distrurbances are noted.

Simple goiter yields to treatment in the majority of cases, in two or three months.

Treatment. The primary thought should be on its prevention: The reason that goiter is not recognized before the third or fourth decade in life, may be ascribed to its insidious onset or develop-

ment; which may have its beginning during early childhood. And to prevent the development of goiter, the following simple and harmless prescription should be administered:

R. Sodium Iodide, dr. I; Distilled Water, Oz. VI; mix., and give one teaspoonful three times a day during a period of two weeks, twice yearly.

This disease being so prevalent, and the treatment so simple and harmless, this measure should be applied to all girls at or about the time they enter the fifth grade. Boys as well as girls should receive the preventative treatment in goiter districts.

The treatment after the goiter has developed to the extent of recognition would be best relegated to the family physician.

However, for a time, the same prescription may be used in double strength during a period of one or two months, but in addition apply the following prescription:

R. Tincture of Iodine, dr. ISS; Glycerine, q. s., Oz. II, mix. Apply thinly twice or three times daily during a period of one to three months.

Should there be indications of enlargements the same treatment may be resumed and continued for months.

The prevention of goiter during pregnancy is as important as its prevention during adolescence and should be a part of the routine care of every expectant mother. The same method as that applied to children can be employed.

CHAPTER CIV.

Accidents and Emergencies.

Such frequently occur, which require immediate attention.

Professional aid cannot always be quickly obtained. It is therefore important that all persons should be able to render assistance in cases of accidents or sudden illness until the physician, who should be summoned, arrives.

The first and most important thing under such circumstances is to exercise that deliberation and self-control so necessary in emergencies of all kinds, one should act resolutely, otherwise he will find himself overcome and unable to render any assistance especially in accidental wounds, etc.

Bruises.

Bruises, caused by falls, wrenches, or blows (blows over the eye), from blunt instruments without breaking the skin; if the patient is seen soon after the accident, very hot, wet compresses should be applied, then bandaged with moderate pressure; many such cases will then not become cyanosed (blue).

If the skin has been broken, then cleanse the wound of any dirt or foreign particles and apply a hot compress of Epsom Salt solution, a teaspoonful to four ounces of hot water, with bandage; this may be repeated every twelve to twenty-four hours or oftener.

Wounds.

Wounds, can only be discussed here in a general way, and the treatment in like manner, for want of space. Lacerations, cuts, etc., by glass, sharp iron, tin, wire, nails, etc., should be thoroughly cleansed and all foreign particles removed and a moist, hot antiseptic dressing applied; one of, if not the best known at this time, is the Epsom Salts Solution, one teaspoonful to four ounces hot water snugly, but comfortably applied.

Prevent Blood poisoning. Blood poison may be prevented by applying pure spirits of turpentine into the fresh wound, then apply Epsom Salt compress, teaspoonful to four ounces hot water and bandage—not so tight that it might prevent drainage.

This makes a quite perfect and safe protection against sepsis (blood poisoning in the hands of the laity), yes, and in the hands of professionals. Use the Epsom Salts solution and add one-quarter teaspoonful of common salt and one-quarter teaspoonful of bicarbonate of soda, that will make an excellent dressing for any septic condition, including gangrene of any part of the body, especially of the toes, of which there are many cases.

Stab or prick by knife, nail, or pin. Are always in danger of infection; they should be well opened and anticepticized—safest by the physician. In emergency, and if there is no physician handy, nail and stab wounds may be treated by squirting spirits of turpentine into the wound, then dress it with Epsom Salts solution as directed for lacerations, cuts, etc.

Hemorrhage. *Hemorrhage* from wounds, may be bandaged by first placing several thicknesses of writing paper or cloth over the wound and tight bandage over that. Or, if an artery is severed, bandage between the wound and the heart with sufficient pressure to stop the bleeding. A stick may be thrust between the rope bandage or strap made of a handkerchief or suspenders, and twisted around several times until the pressure is sufficient to stop the bleeding. *Hemorrhage* of lungs or stomach, coughing and spitting of blood, may be promptly checked by small doses of salt: teaspoonful of salt to wine glass of water. Avoid all excitement and talking.

Nose-bleed. Apply cold compress to the nape of the neck saturate small wads of cotton in 25 or 50 per cent Peroxide of Hydrogen and

lightly pass up into the nostrils, let remain there for some time, if bleeding recurs repeat the process, and leave the last one in the nostril for several hours.

Fainting. *Fainting* or *unconsciousness*—Place the person in a horizontal position (flat on the back) the head if anything lower than the body, or hold spirits of camphor or ammonia or both, next to the nostrils. Soon as possible let the patient take a drink of cool or hot water.

In total collapse or apparent death, practice artificial breathing and treat as in fainting.

Have the bladder emptied with a catheter, it may be due to shock from over distention of the bladder.

Drowning. Remove the person from the water rapidly and gently as possible, turn face downward for a moment and depress the tongue in order that the mucus, water, etc., may be removed from immediately over the entrance to the windpipe, give plenty fresh air.

Now turn gently on the face with one forearm under the forehead, raise the body up so that the water may have free discharge from the mouth. Then place the patient partially upon his side, and apply stimulants, ammonia, etc., near his nostrils or the cold douche to the face and chest to excite breathing.

If the above measures prove ineffective convey the body to the nearest convenient spot, strip carefully, dry it, and place it on a warm bed with head and shoulder slightly raised, and at once employ artificial breathing. Pull the tongue forward to prevent obstruction to the windpipe, expand the chest by drawing arms up to meet over the head, and back again so the elbows meet over the pit of the stomach, thus producing contraction of the chest, repeating this sixteen times a minute, thus imitating natural breathing. This to be continued for one-half or even one and a half hours or longer, if there are any signs of life.

Freezing. The frozen person should be placed in a cold room, slowly and gently undressed and the whole body gently rubbed with cold wet cloth. Later cold drinks (coffee or tea), then place the patient in a cold bed. Only after consciousness has returned should the patient be placed in a warm room.

In cases where the hands, feet or parts of the face are frozen the treatment should be along the same line, rub with snow or cold water application until well thawed out, then bring the parts slowly to normal temperature. Then spread some simple ointment on gauze and wrap the parts.

If a part appears to be dead to a certain point, don't take measures to have it amputated, there is no hurry, apparent gangrene often is only superficial, and after sloughing off the parts may live and remain useful.

Burns and scalds. *Burns* and *scalds*—One of the most convenient remedies on hand is bicarbonate (baking) soda. Teaspoonful to the ounce of water, saturate a cloth in this solution wrap, bandage and keep the dressing moist with the solution which may be somewhat weakened later on. Afterwards, lard, vaseline or olive oil may be substituted.

In scalds—Immediately pour cold water over the clothes or skin, afterwards treat as for burns.

Persons, clothing being in flames, should be thrown on the ground or floor and the flames smothered with blankets, overcoat or any other garment at hand thrown over them, the flames smothered by quick movements of rubbing over the garments so thrown over them and so smother the flames.

Paralysis. Apoplexy, stroke of paralysis, with loss of consciousness. When the face is red elevate the head, and apply cold wet compress to the head, and heat to the feet. If the face is pale, place the patient in a horizontal position, the head if anything slightly lower than the body and partly on the right side.

Patients predisposed to appoplexy should lead a quiet life, free from mental and physical excitement. The diet should be nutritious, but easily digestible. Constipation should be relieved by the occasional use of saline laxatives. To secure a free return of the blood from the brain, the clothes at the neck should be loose.

Even in the mildest cases the patient should not be allowed to leave his bed for two or three weeks, and during this time the diet should be light and unstimulating. To prevent the formation of bed-sores the position should be frequently changed and the parts subject to pressure thoroughly cleansed. In some cases warm saline baths,—sponge-baths—prove useful adjuvants.

Asphyxia or suffocation. Asphyxia or suffocation from gas of any kind. Place patient in fresh air, open the windows, bring the patient to the window, loosen clothing, remove foreign bodies from mouth (false teeth, etc.); if unconscious—cleanse the mouth and perform artificial respiration. *If suffocation is from foreign* bodies in the air passages, if the foreign body is round and smooth invert the patient head downwards and strike upon the back.

Nervous spasm. Are usually relieved by a little salt taken into the mouth and allowed to dissolve.

Stomach cramps. Are usually relieved by taking a teaspoonful of tincture of ginger in half glass of water in which a teaspoonful of bicarbonate of soda (baking soda) has been dissolved. (For spasms due to Indigestion, colds, etc., see Convulsions.)

Sun-stroke; Thermic fever. The patient should at once be removed into the shade. If the face is flushed (red) apply cold water compress to the head, and heat to the feet. The body

should be bathed with tepid water and the head slightly elevated.

Heat exhaustion. If the face is pale, the surface of the body cold, the skin moist, etc., the symptoms denote exhaustion and the patient should be kept in a recumbent position, hot compresses applied to the head, camphor and ammonia inhaled, the body wrapped in hot blankets, hot bottles to his sides, mustard to the spine, extremities rubbed upwards, towards the heart, stimulants such as brandy or strong coffee administered.

Bites by dog, cat, rat, etc. Allow to bleed well, then antisepticize with turpentine, and dress with a wet Epsom Salts dressing for a day or two, then redress and allow the dressing to dry over the wound.

Bee-sting. Remove the stinger, press out the serum from the wound and apply a bicarbonate (baking) soda compress, teaspoonful to the ounce of water.

Bites and stings by insects. If possible press out the serum from the wound, and treat as for bee stings.

Snake-bite. Promptly ligate (bandage) the limb above the wound; suck out the venom; excise freely tissue surrounding fang-puncture, rubbing in permanganate of potash; dress with Epsom Salts solution.

Sepsis (blood poison). The point of infection should be sterilized by application of 95 per cent Carbolic Acid until it turns white, then neutralize by application of alcohol; follow with a compress wrung out of a solution of Epsom Salts, tablespoonful to quart of hot water, bandage snugly, but comfortably, renew the compress three or four

times a day until the swelling and inflammation is reduced.

Peritonitis, and inflammation of bowels.

The treatment may be greatly aided by the application of a towel wrung out of a solution of Epsom Salts, tablespoonful to quart hot water over the abdomen, covered with dry towel; repeat three or four times a day and night.

This is one of the best aids in the treatment of Typhoid conditions.

Chilblain.

The part should first be rubbed with snow or bathed with compress of ice-water, until the circulation is restored; then treat with an Ichthyol and Iodine ointment, or Arnica and turpentine ointment dressing.

Furuncle (a boil).

Is an acute circumscribed inflammation of a sweat-gland or hair-folicle. Single boils are generally due to local irritation. Their appearance in crops is mainly indicative of impaired health. Boils must be distinguished from carbuncles; which are single, large, flattened at their summits, and have multiple openings.

Treatment.

The cause should be searched for and, if possible, removed. Tonics are often very useful. The following paste will sometimes abort them if applied early, and do well at any stage: R. Acid Salicylici, dr. I, Emplast. Saponat., oz. I, Emplast diachol. oz. ½. Ft. Ointment. Or bring them to a head with an onion and soda poultice. After the boil heads show a white speck, it should be opened, the core treated with a small hard cotton point over an application after dipping the point into carbolic acid, slowly, without causing pain, boring in and around the core; then fix same kind of cotton point, dip into alcohol, that will neutralize the carbodlic acid; then squeeze out as much of the core, pus and corruption

as can without causing pain; then dress with 10 per cent Tincture of Iodine in Glycerine, or some antiseptic ointment.

Carbuncles. If treated as described for boils, will be cured without sepsis, and with no risk of loss of life.

Paronychia felon or whitlow. Mix sodium chloride (common salt), roasted until the chlorine is driven off, with parts of castile soap and venice of turpentine, apply as a poultice, is a very efficient application. Early incision down to the bone, especially in tendinous felons. This, of course, by the physician. The treatment after the incision may be carried on as for boils.

Hemorrhoids (piles). Are vascular tumors, involving the veins and capilaries of the mucus and submucus membrane of the rectum. Among the many diseases to which flesh is heir, it might be said that there is none of more common occurrence, more annoying, or more acutely painful than hemorrhoids. The disease occurs more frequently in men than women, and extremely rare in children.

The Cause of hermorrhoids are so numerous and varied that it is impossible to consider all of them in a work of this kind. Occupation and manner of living frequently play an important part in the causation of hemorrhoids. The higher classes of society are slightly more afflicted than the lower; because the well-to-do usually lead sedentary lives, are more apt to be inactive and irregular in their habits and food. *Constipation,* perhaps, is the most frequent cause of heorrhoids.

Treatment. Prevention, should be the first aim. This, in the main, consists in regulation of the bowels, and, in case of constipation, avoid undue straining at stool. Most piles begin from congestion of the blood vessels in the rectum by forcing the hard

stool through the anus. Whenever the stool is so hard that undue straining is required, then the patient should take an injection of warm water to soften the bolus, and so come away without much straining—injection of Olive Oil, or liquified Vaseline. To reduce pain of external piles, paint with Olive Oil or lard oil (soft lard), exert steady pressure with three fingers until the blood has been returned, will give prompt relief. When complicated with ulceration, apply some of the various pile ointment, by use of small pledgets of surgical cotton saturated with the ointment pushed up into the rectum, just above the anal ring.

Pimples.

Is an affection usually met with in young persons of both sexes. It is characterized by small red pimples that are slow in coming to a head. There are several varieties that appear on the face, neck and shoulders. They dry off forming a dark raised or black, circular point, known as flesh worms, that sometimes spread and disfigure the skin. These unpleasant troubles may be caused by eating too much meat or foods of greasy nature. Persons subject to skin eruptions should avoid very salty and fat food. A dose of Epsom Salts, occasionally, may prove beneficial.

Try this recipe.

Wash the face twice a day with warm water and the best Castile soap, after washing rub dry with coarse towel and wipe dry with a soft towel. Dissolve one ounce of borax in pint of water, add two ounces of Glycerine, and sponge the face every night. Acne (black-heads) may be treated by applying a mixture of sulphur and cream.

Sprained ankle or wrist.

Rest is the most essential measure and should be perfect; if swollen, that should be reduced to a minimum by compression with the palm of the hand; the roller bandage should be firmly and smoothly applied. A well

fitted support of adhesive plaster may be prefered to the bandage. Liniments are of little or no good. Elevate the leg; put the hand and arm in a sling. Hot, moist applications may give some relief, but nothing equals a properly applied bandage and reduction of the swelling with the palm of the hand and bandage.

Sprains.

A sprain is an injury of the joint caused either by too great a strain upon some ligament or by crowding together the bones of the joints.

The lesion produced may be either a rupture of some of the ligamentous fibers, or a separation of the same from their bony attachments; or, a contusion of the cartilaginous end of one or both bones.

The treatment of a sprai nis threefold: To prevent strain upon the injured ligaments; to facilitate absorption of the exudate; to prevent adhesions and stiffness of joints.

The first indication is met by a splint or bandage which shall hold the joint in a position most comfortable for the patient. Such a position is usually between flexion and extention.

The second object of treatment is accomplished by massage and passive motion. Light rubbing of the joint should be begun either immediately or after a day or two according to the severity of the lesion.

Passive motion is next in order of application, active motion should be delayed in reserve cases for a few days in order to give the acute symptoms time to subside. It is, however, the best means at our command to prevent adhesions in the joint.

A dressing which fulfils the first and second indications and allows active motions to a safe extent, consists of strips of adhesive plaster from ½ to an inch wide, put on alternately from right to left and from

left to right, so that they shall cross each other at a right angle.

In this manner irregularities in outline of the parts may be smoothly covered.

This dressing is especially adaptable for the thumb, wrist, ankle, etc.

The ankle is more often sprained than any other joint of the lower extremities.

In almost all cases the foot is turned inward so that any tearing of the ligaments which occurs is usually on the outer aspect.

CHAPTER CV.

Poisons and Their Antidotes.

Acetic acid, citric acid, muriatic acid, phosphorus, matches, rat paste, tartaric acid.

ALKALIES, magnesia, slacked lime, plaster—lime from off the wall, soap water, white wash, oil, milk, white of egg, thick gruel, afterwards flax seed tea.

Carbolic acid, creosote.

Alcohol, glycerine, to each ½ ounce of carbolic acid taken, give 3 ounces sulphate of magnesia (Epsom salts) or the same of glauber salts, one of the best and safest remedies. Also strong soap suds.

Nitric acid, oxalic acid.

Lime water, plenty of it, or magnesia, these are the only antidotes. Follow with mucilaginous drinks.

Sulphuric acid (oil of vitriol).

Soap in solution or magnesia, will counteract its influence. Water should not be given as it causes great heat when mixed with this acid. White of egg, no water.

Bee sting, insect, vinum, wasps, etc.

Extract the stinger, press out the vinum, apply ammonia water compress or a compress saturated with teaspoonful bicarbonate of soda to the ounce of water.

Alkalies, liquor of ammonia, ammonia water, muriate of ammonia.

Diluted vinegar, especially cider vinegar, lemon juice, orange juice, citric or tartaric acid. Then follow up with demulcents to protect mucous membranes. When inhaled give vapor off of acetic acid or hydrochloric acid or chlorine water.

Liquor, potash, lye, carbonate of potash, or potash in any form.

Vegetable acids, lemon juice, vinegar, white of eggs, milk and gelatine, oils such as castor oil, olive oil, linseed oil and melted lard, destroy the caustic ef-

fect of those poisons. Mucilaginous drinks may be given afterwards.

Iodine in different forms.

Starch, wheat flour mixed with water, white of egg, milk and mucilaginous drinks.

Alcohol.

If recently swallowed, emetics: hives syrup, syrup of ipecac, two or more teaspoonfuls. Spirits of ammonia, after vomiting, ½ to 1 teaspoonful in water. Inhale ammonia.

Antimony and its compounds, tartar emetic, butter of antimony, oxide of antimony.

If vomiting has not occurred induce vomiting by tickling the throat and giving large quantity of lukewarm water, after which administer astringents, such as infusion of galls, oak bark or strong green tea, and milk or eggs.

Arsenic and its compounds, arsenic paste, fly paper, arsenic soap, paris green, rat paste, rough on rats.

Oils, melted lard, butter or milk. Then induce vomiting. Then mucilaginoum drinks as soon as the stomach has been emptied. Oil and lime water mixed before and after vomiting. Milk or other bland fluids to wash the stomach. Apply hot wet compresses over the abdomen.

Copper salts, blue vitriol.

White of eggs, soap, milk, magnesia. In absence of eggs give paste made of wheat flour and water, paste of flour which may cause vomiting.

Mercuric chlorid, corrosive sublimate, red precipitate and calomel.

White of egg, paste of flour and water, magnesia, milk, lime water. Then induce free vomiting or evacuate with stomach pump.

Ergot, black hellebore, veratrum veridi, aconite, digitalis (fox glove), gelsemium.

The general treatment of this class of poisoning is to evacuate the stomach, by emetics (vomiting), or by the stomach pump. Follow with castor oil or other purgatives. The best of these are Epsom salts.

Belladonna, strominun (jimson weed). Emetics, castor oil, strong coffee, cold applications to the head, inhalation of ammonia.

Nux vomica, strychnine. Melted lard, then follow with emetics, empty the stomach.

Turpentine. Magnesia sulphate (Epsom salts), 1 ounce in water, emetics, milk, barley-water, etc.

Serpent or snake bite. Free bleeding from the wound, open and suck the blood from it. Ligate—tight bandage above the wound so that the poison will not enter the circulation. Brandy or whisky freely; call a physician to treat the case.

CHAPTER CVI.

Psychology of Child Development

Prelude.

THE purpose of this chapter is to study as far as possible the phenomena of mental and physical development of the child from the view of functional psychology.

To enable parents to train the young, it is but natural that they acquaint themselves with the natural forces of infant and child development.

We do not assume covering even in a general way, all the aspects of child study, but rather to outline a point of view from which it is believed much of the chaotic material of child study will assume a wide significance.

And be of great assistance to parents, by means of a concise, and plain discourse on a subject so vital to parents, teachers and child.

It is particularly important that parents and teachers should see clearly that the mental functions of the child be rightly understood in the broader setting of the activities which give rise to them; that they realize that the

so-called kinds of mental activities are differentiations from impulses altogether original, and undifferentiated mode of reaction.

These points can be clearly comprehended, only after a study of the earliest mental development.

Hence, those whose duty it is to train and teach the young cannot afford to neglect the study of this phase of child growth.

Requisite to successful training.

Therefore, the prime requisite for successful training is the interpretation of the child—the discovery of what the things the child feels and does may mean to him with his relatively undifferentiated experience. Not what they would mean to an adult of a more highly developed life, such knowledge does not furnish a rule of guide for the parents who face such situations and problems, but it does furnish knowledge of what they are dealing with, and that should certainly be fundamental in all methods of training and instruction.

The problem of interpreting children's acts is a complex and difficult one in any case. But that may be much simplified by beginning with larger and more typical facts, instead of definite and special instances. This complexity should not discourage us from attacking cases of greater generality.

Value of child study.

The value of child-psychology is not in that, that we may know this or that fact about child-life, or about the condition the child's "being," but that we may know how the growth of a human being proceeds, what helps and hinders, what furthers and what retards it, and how these results are brought about.

When genetic psychology is conceived in this sense, then the quarrel about the practical and moral worth of child-psychology to parent and teacher will cease. We are told that it is only ourselves we know; that it is only ourselves we can directly get at, that our knowledge

of mental and emotional states of children, even when we bring the most sympathetic insight and collection to bear, must after all be based upon our knowledge of ourselves, and be a projection out of ourselves, out of our own consciousness. All of which is true. And we are also told that in the adult we are dealing with complicated results, with habits of preceiving feeling, and thinking, that got formed and set, and that almost automatic in the dim and forgotten past; and, that we cannot really analyze or interpret these fixed effects save by reference to children in whom we find the causal condition still operating. This is also true. But, the moment we take as our problem, the matter of growth or arrest of growth or development, then we find the true psychology of adult experience, becomes indefinitely more available and more indispensable for dealing with and interpreting what the child does and says.

That which arouses anger, affection, alertness, hope, concentration, comparing fallacious inference in adults, is that, and that only which arouses it in the child.

It is only intimate acquaintance with the condition that provokes such responses in our own lives, that we can get a true understanding of what goes on in the child.

It is as we see how our own reactions in such matters modify our own further behavior, our ways of feeling and thinking, how they promote growth or tend to arrest us, that we can really judge influence and effects in children.

The successful study of child-psychology and its ultimate results depend upon the mode in which it is undertaken.

Most studies depend first of all upon a careful selection of a few best types. So in child study, we pick out a few important centers, around which we gather a large body of facts, trace out the causal relations of the central object to its environment, and finally we discover by comparing with other similar things, the representative law which governs other cases.

INFANT-CONSCIOUSNESS.

One of the primary problems of child-psychology is to discover the order and appearance of certain powers in the infant—the infant's bodily movements.

When infant consciousness begins.

The question as to when the infant is first conscious is and probably always will be, extremely hypothetical. But, of one thing we can be sure, namely, that from the first, the most prominent characteristic of the infant is its tendency to certain activities. For the purpose of getting a fairly good conception of the significance of the early activities of the infant, Preyer in "The Senses and the Will," p. 196 ff. Classifies the infant movements according to their stimulus; into reflex, impulsive, and instinctive, and this may here be accepted as a working basis.

These movements are practically all alike in that they are responses to stimulations, and differ chiefly in degree of co-ordination that lies back of them.

Attempting to say definitely what kind of a conscious experience that of the new-born babe is, would be assuming a knowledge that is impossible.

The point to be emphasized is, that there must be a unified consciousness from the very first, although it be vague.

From this undefined consciousness the special senses arise, or are to be differentiated and generalized, and we may say; consciousness is at first undefined, and grows in definiteness of reference and content as activity becomes more and more complex.

Primary consciousness.

It is not necessary here to enter into the vexed question as to just when consciousness itself first appears, or, whether it is always present in living matter, in some form. Some psychologists hold that the embryonic child has a vague consciousness. We can sympathize with this

hypothesis. For it is known that an embryo when aborted and the embryonic sack has not been ruptured remains quiet; but when it is touched with an instrument through the after-birth it moves—showing consciousness of being touched with the instrument.

What kind of consciousness.

The really important point however is not so much, when does consciousness begin? But, rather, what kind of a consciousness it is when it has come; also in what way does it become more definite and more adequate to the needs of the child?

Brief answer to these questions should be a help to properly interpret many activities of early infancy. When we know the kind of consciousness we have to deal with, we are more able to interpret intelligently many expressions of emotions, so-called noted in infants; for instance, expressions, fear, astonishment, pleasure, etc.

Attitude as to himself.

We also should have, at least, ground on which to say what the first ideas or volitions are like, what they mean in the consciousness of the child.

The definite and useful responses are not yet isolated and fixed. From one viewpoint the infant seems to be altogether, at the mercy of external stimuli. On the other hand, the very fact that he does respond and is not simply affected, is an indication of an active attitude on his part.

The very expression and posture of the infant point, not to a helpless, automatic submission to every chance stimulation, but rather to an active putting forth of effort to get more stimulation.

However, it may be well to have in mind that it is not the mere presence of an act that can be taken as an index to the form of consciousness lying back of it, but rather as to how the act arose, how it came about. Consciousness is related to the growth of activity, but not to activity.

Activity and consciousness.

The human comes into the world with but few definite forms of activities, or actions, but builds up many in course of his life.

Animals and insects come into this world with ready complexes and adjustments.

Animals and insects come into the world with ready complexes of adjustments, but not the kind of conscious experience as that is possessed by the human being.

Consciousness therefore is not to be considered from any particular act or acts, but the organization of the activity as a whole, and as it was built up in the process of the child's experience.

Distinguishing of special forms.

The distinguishing of special forms of sense experience, from the primary general consciousness, develop as a function of the child's increasing demands for fuller activity. Thus, the child's first objects are certain possible activities that are symbolized by certain sensations involved in performing the acts. The sight of an object, of a doll, or rattle, excite certain activities with reference to it which requires the use of the hands or mouth to be carried out, and so the growth together with the mental development occurs.

Then, to sum up, as regards the first consciousness of the infant, we see that it is relatively unorganized and lacking in definite meaning as are the overt activities that go along with it, though special senses may develop to a certain extent, it is not likely there can be any well-defined consciousness of the respective sensations as such, except as they be co-ordinated in single activities, and are made to serve definite functions in carrying out such activities.

EARLY EMOTIONAL EXPERIENCES AND THEIR INTERPRETATION.

Of emotion in general, it may in brief be said, that it

is no more capable of being defined in and of itself than any other mental attitude.

As direct activities arise.

It is a direct product of previous activity, and arises in consciousness with reference to present action.

Every emotion presupposes a definite organization and co-ordination of previous activities. Its definiteness, its intensity, its quality, all depend upon the degree of co-ordination that has given rise to it.

Just as co-ordinated movements of any kind must occur with reference to some end that is to be accomplished, so must the emotions that arise within such co-ordinations.

As the co-ordinated movements are thus different from the impulsive movements, so are emotions different from the mere sentiency, if such exist of the earliest consciousness. In other words, there is no such thing as emotion in general; it is always directed towards something, and it is, therefore, impossible to conceive of the diffuse, unorganized consciousness at this stage of life, when impulsive movements predominate, as being capable of emotions in anything like the sense they exist for us.

Particularizing experience.

Emotion is essentially a "narrowing and particularizing experience." Calkins Psychology, p. 264.

The possibility of emotions grow as the activities become organized and the ends capable of being reached become more and more remote, and it is not until maturity that a genuine basis for the higher and more subtle emotion exists.

Children often simulate the presence of these subtle emotions, unintentionally, through imitation of and suggestion from their elders.

The child thinks that he is expected to feel so or so, and tries to find something within that that may possibly be the attitude desired.

Here we are of course concerned merely with aspects of the earliest emotional experience.

Importances of early exercising.

Children should be exercised as early as possible in the conscious inhibition (restraint) of his reflex movements, because that has an important influence on the cultivation of the child's will.

By the inhibition of an act we mean the checking or stopping of that act or action; not by any mysterious force or command, but by another act. Thus an infant violently screaming, may be turned on its pillow and instantly become quiet.

Singing, sounding a rattle, playing on the piano, etc., have a quieting effect on very young babies; but in a strict sense of the term, is not inhibition, but rather the supplanting of a feeling of discomforts, along with its motor consequences or reflex activity, by means of new impressions.

Imitation, may be said, begins in the child at the beginning of social consciousness. Mental development being a socializing process, the more important phase of the interaction of the child and society have received special names, as if special forces were here operative, or as if the child had certain special faculties through which he takes advantage of the social values in his environment.

Imitation as regards socialization.

By many imitation is regarded as such a special dispensation through which the child is socialized. Prof. Baldwin, in his effort to work out imitation as this fundamental socializing element in human consciousness, has proved, as conclusively as could be desired the truth of the position here advocated; namely, that all mental development may be stated indifferently from the side of the individual or from that of society. He has illustrated the truth of the fact, that of necessity all mental life, reduces ultimately to the imitative type, and it may rightly

be held that all consciousness, as it differentiates in social environment, is thereby socialized; in other words, that socialization is one aspect of all developing consciousness.

True conception of imitation.

Hence, if this conception is true, Prof. Baldwin, by setting up imitation as an ultimate category of the social consciousness, is obliged naturally to make it synonymous with mental development itself, and then, may be put thus: If imitation is the means by which socialization is effected, it must be a fundamental category of the mental life, since this process is really from one point of view the sum and substance of mental development.

The problem, of course, is whether imitation is such a means, and whether if it is, it is not merely a restatement of that which we are already perfectly familiar with, but under a different terminology. To society, practically everything the child does, as it gradually comes to maturity, is an imitation of the more adequate activity of older members of society.

The child must learn to walk, talk and use his hands in certain ways, he must dress, eat and sleep after the manner of his elders. He learns to read, write and engage in a certain vocation, or several vocations after examples set by some of the older people with whom he lives.

From this standpoint, a great deal if not all, of what a child does is easily traced to some copy set by environing conditions. He constantly copies the activities, customs, notions, etc., which surround him. Hence, the importance of the infant's environment. Not only does he copy the activities and habits of those about him, but they are so to say, impregnated, and become the child's own characteristics in life.

The Moral Ideas of Childhood.

The purpose of the foregoing discussion of the devel-

opment of experience in infancy should be to make us better able to judge its degree of development in childhood and youth.

Importance of truth-telling.

By the moral ideas which arise with reference to coming together with adults' society, we may mention such as those regarding truth-telling, keeping of promises, respect for rights and property of others.

"Morals" are thus used in the original sense, gradually grown up with society through the testing and sifting of centuries, as expressed in social morality.

The conduct and way of thinking by adults are largely governed by this social framework. But, of children, it may be said; in one sense they have no moral ideas, at least in so far as they are unconscious of these social requirements.

Children do certain things in a more or less impulsive fashion, things that would have no moral significance if performed by an adult. The problem then is: How shall we regard such acts, and what sort of ideas concerning adult morality can children be said to possess?

There is no aspect of the child's development more likely to be misunderstood than this, and more upon which it is more essential that parents and teachers should be informed. The theory one has on this matter very intimately affects the character of his treatment of boys and girls. It is not only what they see others do that affects their future attitudes; but it is as much the sort of intercourse they have with others, the nature of the interaction between themselves and their playmates and elders.

It should be needless to say that an intercourse in which the elder knows how to judge the child's attitude aright will produce, in so far, a moral development in the child; while the failure to know what his acts mean to him, can produce almost unlimited distortions in his mental development.

The moral status.

There are two views commonly current as to the moral status of the baby and little child; the one is that he is totally depraved, the other that he comes, "trailing clouds of glory" after him. It might be said that a third view, a combination of the two is the one ordinarily held, namely, that the baby is partly good and partly bad.

But, neither of these views have arisen through a psychological interpretation of child-life. They are essentially theological in origin and meaning. The correct procedure is to analyze carefully what the term "moral" or "being good or bad" involves, and then, by an examination of the form of the child's experience, to determine in what sense he can be said to be moral or immoral.

In adult society the term "moral" can be properly applied only under special circumstances, and its meaning varies with the circumstances.

That is, it is not a term to be used unconditionally. That which is moral with one person or at one time may not be in the case of another person or at another time.

The primary cause of the relativity of the term "moral" is the fact that the fabric of society is always changing.

The circumstances that induce moral change, or that make a situation moral rather than non-moral, are of the same sort as those which produce intellectual change.

All such changes occur at certain crises within activity and with reference to the necessities for further actions.

Ordinarily we are non-moral.

It may be said, that ordinarily we are non-moral. We perform our every-day duties in a direct unquestionable way. Whatever we do in this way cannot be called either moral or immoral.

It is only when the doing one of these things that we have not previously questioned our right to do,

comes into conflict with some recognized obligation to our family, friends, or society that we call a halt and examine more carefully the meaning of what we have before done with no special thought; what is its value, how must it be readjusted, or how must the previously recognized duty be readjusted so that there may be no conflict between them?

For instance, society recognizes that each individual has certain property rights. Perhaps one has been accustomed to keep lost articles of little value that he finds in public places without thinking anything in particular about it. At another time he finds a purse containing a large sum of money, because of the amount and perhaps the possibility of discovering the owner, he realizes for the first time that he has no right to keep the property so acquired. He may conclude to keep the purse, but, whether he does or not, the question of its disposal, by its having come to consciousness, is thereby raised to the moral plane.

Thus it is, at certain crises that even adults assume the moral attitude. Such crises are those that bring us to consciousness of our actions with reference to values that we recognize as of more vital consequences than those which are involved in mere acts of the moment.

Morality a relative term.

Hence, "morality" is clearly a relative term, depending on the system of or values or importance recognized at the time and upon the extent to which activity has been organized with reference to these fundamental values.

The two characteristics of the moral attitude.

This digression should make two points clear that are quite fundamental to our appreciation of the child's moral status.

An individual to be on a moral plane must have in the first place, some knowledge of an organization of values beyond his immediate activity, and, secondly, he should

feel the relationship of his own acts to social rule and order.

A man's or a child's morality does not depend upon the breath of the values recognized, but upon the degree to which they have been brought to bear on the particular acts.

Even among the most cultured people there are many individual acts that have never been felt to be consistent with well-organized social conventions. As long as they remain unvaluated they are simply non-moral.

Application to the child.

Applied to the child, it is clear he cannot at first, nor even well-nigh to youth, have but a relative comprehension of the meaning of the complex system of values as recognized by society. He can learn their meaning only by meeting crises for himself and readjusting his direct and unreflective action to ever broader settings.

Such process necessitates years of growth mentally and abundant opportunity for interaction with playmates and elders. Until he has thus grown into this complex life, its requirements must always seem external, and in a sense imposed upon him.

Two sets of problems.

Hence, there are two sets of problems as regards the morals of children. First, what is the attitude toward grown-up customs and moral regulations? How is their activity modified by the fact of their living in the midst of social order of whose value they are only dimly conscious, if at all, and yet to which they must to a certain extent conform?

Second: what are their own morals, what sort of ideas do they themselves have as to conduct?

That is, what crises have they had to meet, and of what value can they properly be said to be conscious?

So far as adult values are concerned, the child is non-moral; and yet there are some of these values to which he should be led to conform his own actions though they

have little meaning to him. On his own plane of experience he has a limited moral code of his own, and the degree of his adjustments of action to these values that he has worked out himself may be counted his morality. He sets up narrow standards for conduct, and within his limited environment he assigns to various persons certain places and functions. He is much more keenly alive to the maintenance of the relations he has conceived to exist than we often think. For instance, a boy, between four and five years of age, who has assigned to his parents certain functions, each, is much offended if they transgress. One who sees little of his father during the day, it seems a grave breach of propriety to him for his father to presume to reprove him, while he takes a reproval from his mother as a matter of course.

This throws an interesting light on the tendency of even young children who build up some sort of a system which they expect to be maintained.

No doubt at first the feelings analogous to moral ones arise when the child has the impulse to break, or sees others break, what has been fixed and habitual in things that concern him most closely.

Notwithstanding the beginning of such crude morality the child's action is, in the main, direct and impulsive, that is, only slightly if at all, valued with reference to any remote ends.

They are the simple outgo of energy. As a baby, he kicks and scratches; when a little older he says cross things, tells stories, quarrels and sometimes takes what does not belong to him.

In so far as these are direct responses to stimuli or direct efforts to secure certain ends, they are non-moral. Little by little he comes to meditate on these outputs of energy by some sort of dim recognition of more remote ends than those of the mediate act-ends which are yet in some way involved in it. This discussion chiefly concerns the first of the problems mentioned above. As is evident

from what has been said in the foregoing considerations, the answer to the second problem will vary greatly with each child, especially according to the degree in which his elders understand him on the first point.

With some children there is no moral growth, nor morality, because of the atmosphere which adults throw around them. They are met at every turn by some dictum that simply says, "Do or do not, do this or that." The result is, either blind submission or rebellion, but never moral advancement.

They do not meet and decide anything for themselves —which are the supreme conditions of all moral development.

Adult morality as a model.

Adult morality—the model to the the child—The status of all children, however, is much the same as regards the attitude toward adult society. "He will do, as the parent does, rather than that which he was commanded to do." Children are necessarily largely outside of the complex system of the conduct of society. Not until they have learned their value, or meaning, by feeling the need of them in the actual process of experience, they are arbitrarily imposed upon them, in so far as they come to their consciousness at all.

Many things that children do are to be interpreted as efforts to get some order and meaning into what must mostly be as to themselves the unintelligible usages of the adult. Language, the meaning of abstract words, and terms are things that puzzle most children. They necessarily make senseless efforts to understand baffling words.

Many of their reasonings may remind one of the seemingly verbal difficulties in which the Greek philosophers were at times involved. However, to the Greeks such problems were not purely verbal, they stood for honest efforts to define the exact meaning of the vague terms. Not unlike them the child is often confused in the midst

of complex meanings and activities. Sometimes he tries to straighten things out in his limited fashion. At other times, perhaps generally he ignores the complex regulations in the midst of which he lives, and in the most direct manner possible, he seeks his own conclusions.

Excellent illustration.

A most excellent illustration of the effort to clear up things was furnished by a little girl of four, who was perplexed over the meaning of the word "sometimes." She tried to solve her trouble thus:

"Mama, don't people die of fever sometimes?"

"Yes, dear."

"I had the fever, didn't I, mama?"

"Yes."

After a moment's thought: "But I didn't die, did I?"

"No."

"Then that wasn't sometimes, was it, mama?"

This illustrates on the side of language what we are getting at on the side of morals; and this illustrates our point in the child's attitude towards truth. For the moral adult in modern society, within certain limits, truth is a part of his life. But for the child it is a thing to be manipulated, to be juggled. There are various means through which he can escape the consequences of falsehoods.

Every parent and teacher is more or less familiar with them.

Some children (by reason of learning from others) think if they place the left hand on the right shoulder while telling falsehoods, the evil consequences of the untruth are avoided. Some think they are not bound by promises unless they accompany them with the words: "I may die if I don't."

In certain portions of the Netherlands, we are told, no schoolboy dares break a promise which he has made while holding up his right thumb. This oath is inviolable.

Who is not familiar with such terms as "Honor bright," "Upon my word," etc.? All of them give evidences of the position we have taken that the adult attitude toward truth is foreign to the child.

For him it is an external something whose obligations and consequences can be avoided by the use of certain signs and formulas.

Of course, this attitude persists too often into adult years, but it is essentially an evidence of undeveloped intelligence. An ignorant man in taking an oath in court will sometimes attempt to kiss his thumb instead of the Bible, thinking if his lips do not touch the sacred book, his oath will not be binding.

Another illustration.

A little boy suspected his sister of having taken his pocket knife. When she answered his inquiry in the negative, he asked in return, "Honor bright?" "Honor bright," she replied promptly. "You may die if you do?" With a trifle of hesitation she said: "Yes, I may die if I do." But, the brother was not satisfied; there was a supreme test, and he applied that.

"Crook your little finger," he said, "and say, 'The worms may eat me when I die, if I have your knife.'" This was too much, and putting her hand in her pocket, she drew it forth, saying, "Here, take your old knife."

Attitude towards deception.

Linked closely with the attitude most children have is deception of some kind. This tendency to deceive seems to be characteristic of most low-grade, or undeveloped minds.

Stating it functionally, we may say it is the way a relatively unorganized mind reacts to comprehend, or which it feels it is unable to cope with directly, whether these forces are those of a highly organized social situation, as with the child, or those of nature and opposing tribes, as with the savage. This is one aspect of the attitude that shows itself one's thinking. The child, being still outside of the organization of society, and not un-

derstanding its requirements or conventions, feels, however, the impulse to make some sort of adjustment to them.

His own narrow world of values and necessary lines of action is the center from which, and with reference to which, his reactions are adjusted.

He knows nothing of the world's way of doing things. Only by experience he will learn the meaning of truth and its value in accomplishing his ends. He realizes only one end, and sets about to accomplish it by manipulating the bits of social force that he finds within his reach in a way such as to bring results as quickly as possible.

Much deception in children in play.

Then, how is he to know when his methods are illegitimate? Thus much of the deception practiced by children may be explained, but not all. Much of it is purely play, the free interaction of vivid imagery with a single sense-content. So also with the children's lies; some are unreflective efforts of low-grade minds to get control of forces that they cannot meet directly. Others are solely the result of the child's getting his images confused with the reality of sensation. It is manifestly incorrect to call a misrepresentation due to vividness of imagery a falsehood.

The child thinks he is telling the truth. What he says has the same meaning in his life as does truth to the adult. He simply has not learned to distinguish between the real and ideal worlds.

As regards the great mass of real deception practiced by children, we must judge that by its meaning to the child and not by its conformity to the adult standards.

Judge the child by adults.

We must always judge the child from the standpoint of his undeveloped sense of adult values.

If the child is untruthful, deceitful, or predatory in his habits, such conduct, we may be sure, simply cannot mean

the same thing with his degree of mental organization that it would necessarily mean in a mature experience.

We are not advocating that the child can be unrestrained in such action, but rather before holding him culpable, we should try to find the situations into which he has been thrown that have furnished the stimuli for such conduct.

Child's methods to reach end.

Normally, the child's methods of reaching ends will not be far different from those employed by its associates, more particularly its parents.

If in the midst of presumably good surroundings, he uses illegitimate means to satisfy his wants, it is because the proper expression of his impulses is denied him, or because he has been repeatedly misunderstood in what he had intended rightly, and by punishment is made all the more vividly conscious of it; the very emphasis of the inhibition makes him act in the forbidden manner again.

As confirmed falsifiers (story-tellers).

Many children are confirmed in story-telling and disobedience because their direct and unelevated actions are interpretated as untruthful or as refractory by adults.

When merely approaching children in such manner is to make them conscious of their act as something bad, they may not know what; but when it is repeated, as it surely will be, it is with meaning that it did not originally have to them.

Thus, a thoughtless imitation, a direct expression of impulse, is forced into the child's consciousness with a sense of the appropriation that it has for the adult, but with none of the meaning. He repeats it with the interpretation of which he has received from his elders, and in a sense identifies himself with it.

Impulse towards bad language.

The impulse towards bad language is to be treated along the same lines. The child is constantly picking up and "trying on" all sorts of expressions altogether meaningless

to him. It may be taken as a general law, that it is important for an undeveloped mind to be susceptible to every feature of the environment that is in any way connected with the growth it is then making. It is then easy to see that the little child, in the years when his language is developing most rapidly, should be almost abnormally susceptible to new and striking expressions.

If the expression attracts the attention of others, if it fits, it comes to the front in consciousness, and is sure to be repeated. On the other hand, if ignored by his elders or by his playmates, it will not come to the focus of attention again, and probably is permanently dropped.

A boy's impulse to force of language.

A three year old boy in a refined family was once trying to tell his mother and sisters about something but they being busy did not pay attention to him and several times asked him to repeat his story.

Finally he cried out, impatiently:

"Go to ——! Do you hear that?"

He had found his expression no one knows where, and so no one paid the least attention to it; he never said that again. If he had been scolded for using such naughty words, he would probably have been out with them again at the next appropriate moment. (On the other hand had the parent been aware of the fact that he had used these words previously and in the presence of other people or playmates, then the proposition would be a different one.) This does not account for the acquiring of bad language in later childhood. Here it is not an unconscious repetition of meaningless expressions, but an attempt to define the experience by the vigorous and striking words used by others.

The child feels the force of the language and seeks to get its value into his experience. Even here there would be no sense of badness, were it not for his being made conscious of its significance by the reproofs of his superiors and associates.

Finally, in summing up this subject, it seems clear that the child is born into a complexity of social order, of which he can have no consciousness, until he has lived among them and felt their need in the development of his own experience.

Our interest lies in that we learn how the child reacts amongst these imposed and external values, so that we may be better help in the normal symmetrical development of his experience.

One of the functions of parents is to help him bridge over the space that exists between the child and the requirements of society—requirements of which he is conscious, not as unrealized values, but as external impressions which he perceives.

Sense of disparity.

The sense of disparity should not be lost sight of: Difference in age, condition, rank, etc.

Thus far we have endeavored to get a clear conception of the kind of conduct which the child's sense of the differences between himself and others may produce. We have not raised the question as to how far it is best, or normal, that the sense of difference should exist. How far then, should the difference between the child and society be impressed upon him?

And how far should he be dogmatically commanded to do so and so, thus being made to feel the arbitrations of social regulations?

Some would answer, at least by their actions, that the child should be made to feel the difference at every turn.

Their every attitude towards children is that of dogmatic superiority.

May carry a good thing too far.

Without effort on the part of their elders, children are often quite painfully conscious of the inadequacy of the means they use to the ends they realize. Much of the so-called "immorality" between the ages of six and

ten is undoubtedly due to the effort on the part of boys and girls to emphasize their feeling of adequacy to their surroundings in which they in reality feel themselves deficient. At any rate, at the beginning of adolescence the youth does many things, he acquires attitudes of bearing and voice, which help to himself his realized deficiencies of adjustment to things and people: The boastful, overbearing manner of children at this age is to be in part attributed to the half-instinctive effort to conceal their deficiencies by a bold front.

Periods of moral impulse.

The periods into which child life, with reference to moral values, may be divided as follows: 1st. The impulsive period, up to the age of six or seven. By "impulsive" is meant the kind of action we described in the infant's early movements, but here with reference to a different system. Then his movements were impulsive in that they were not co-ordinated to perform even simple forms of action. Now, he is impulsive in that his activities are direct and unco-ordinated with reference to an organization of activity as a whole. 2nd. The period during which there is some sense of a wider organization of action, but little or no comprehension of its meaning. Consequently, all regulations, especially moral ones, are felt as more or less arbitrary and unnatural—a system to be avoided, or manipulated in so far as it obtrudes itself upon him. This period extends from about the seventh year, to the age of puberty. 3rd. The period in life immediately preceding puberty, when the individual duties and responsibilities appear more prominent. The stage of life during which the child begins to have clearer ideas within his own sphere. It is during this period of development, that the first differentiations of conduct are appearing in which he is becoming conscious of in his daily life, indicating to him the desirability of social convention. 4th. The period of the child's morality begins with adolescence. It is during this stage of development that be becomes definitely

conscious of himself as a part of the community and realizes its social conventions and usages.

Cruelty in Children.

A discussion on the morals of childhood would be incomplete without some reference to childhood cruelty —the common tendency in children is to be cruel. The time when others' rights are disregarded, and when animals are most likely to be abused by many children, is between the sixth and twelfth years of their age. In a general way, this may be accounted for, as some of the other phenomena above have been accounted for, by regarding that as one aspect of the effort the child puts forth to get control of the objects of his environments.

For more detailed discussion see "Child Interests."

Grant that the child now comes to consciousness of the complex world of objects that are before him for the first time, objects that are to be manipulated in various ways and at the same time he feels his inadequacy to do what he would like with them, it is quite conceivable then, that he should try to express his craving for mastery by harshness. Primarily his desire may not be so much to produce suffering in others as to get a vivid sense of his ability to control them, *to do what he wants to do to them.*

The fact that the satisfaction of this craving may result in cruelty is due to these characteristics of his experience, and an imperfect degree of organization.

The undeveloped and narrow personality of the child is necessarily unable to enter largely into the feelings of others, hence it is easy for it to disregard other pain. This of course is due in part to ignorance and inexperience, producing pain without knowing it.

Lack of organized experience, and spasmodic action, in which there is little foresight, and coupled with these characteristics, love for activity, excitement and hunger for sensations makes the child do things without regard

Emotion after Infancy.

for others. A few words on emotional development after infancy, especially those on the aesthetic side, shall conclude this chapter.

All emotional experience as pointed out in this chapter dealing with early emotional life, presupposes a certain development of consciousness.

This is particularly true of the subtler type of emotion. The child may react with pleasure toward objects of beauty or art, and convey the impression that he appreciates the values involved, but the real point of interest is not usually one of aesthetic importance.

The child is apt to be attracted by the color of a picture or a familiar object.

O'Shea, in tests on school children found that colored pictures were always preferred to black or white ones of the same subjects, and that familiar objects such as cats, dogs, babies, etc., in pictures always excited much pleasure. In the adult, the chief means of arousing the aesthetic emotions are rather remote than immediate. For instance, a slight suggestion is given in a picture, that, by association, calls up things too deep for utterance—the sublimation of years of experience and struggle.

The deepest emotional effects center about the fundamental instinct of personal affection and love in its various forms.

The subtler emotions, as well as the moral sense thus, are not something given independently of development, but imply a concomitant, complex experience and maturity.

DEVELOPMENT OF INTERESTS IN CHILDHOOD.

What are the activities that characterize unorganized and immature mind and body, and in what way do they later and more adequately react?

The deeper question as to the nature underlying

every process of development, that of connecting the past with the future in any given stage, we shall not attempt to consider here. True, in a certain sense no activity can be considered entirely with reference to the present status of the organism, but that question belongs to philosophy, while we are concerned here with certain psychological and biological facts.

Here two factors in the determination of the child's activities require a brief consideration; namely, those of environment and immediate heredity.

As to environment, this may be regarded as restrictive and modificatory, rather than determinative of organized dispositions to action that is found to be characteristic in childhood. The specific things done may largely be due to outer factors, but the attitude of the doer and the meaning of the act to him must be of inner rather than of outer origin.

In maturity it does not matter which predominates, but the necessity of development makes the inner unfolding of the highest importance in childhood.

Heredity in child's interests.

Heredity undoubtedly is a factor in determining interests and activities. In heredity we approach what we may call an individualizing factor.

Many of the fundamental lines of the child's character are to be traced to his kinship. In the immature organism the individual elements lie relatively in the background; but as it is approached, the lines of individuality begin to stand out and the hereditary tendencies most likely assert themselves. In this sense we carry over into the descendant of the individuality of an ancestor, some specific features of body or trait of mind. These inherited elements may have no functional significance, as is abundantly testified to by those who give this close attention. Much depends upon the training in early infancy and childhood, during which harmful characteristics may be extinguished. That some of the

child's characteristic are traceable to race heredity, however, is quite well founded, and by many noticed.

To illustrate heredity of motion.

A boy, for example, was observed to use a peculiar motion in placing a hat on his head. No one about put his hat on so. At length the mother recognized in the boy's movement the identical one of his grandfather under similar circumstances. The boy was too young when his grandfather died to have copied this curious habit. This was simply a carrying over of a trait from a direct ancestor, and it came to the surface and persisted partly because it stood completely outside the vital processes of development and partly because there had not been time to crowd it out. It is in this manner that we account for many other physical and psychic traits.

At first these individualizing elements are relatively, so to speak, crowded into the background by the more fundamental requirements of organic development. In early infancy the child can hardly be said to have individuality. It is during infancy that children approach more nearly a common type. And after the more fundamental lines are laid his individuality begins to appear; it is later on he begins to be affected in individual ways, instead of in general ones, through his environment, and still later to show his hereditary traits. But it is certain that the environment determines the most fundamental traits of individuality in the immature form, while in the mature other factors enter; individualities of immediate ancestors and process of growth in the given environment; in other words, the race-dispositions as modified by education. Just as there is less individuality in the first reactions, so there is less in the first interests.

Since interests are indicative of the functions of the developing organism, we may conveniently find the process of growing control. The process of development is first of all one of broadening and deepening the control of the internal as well as external elements.

First unfolding activity.

In a general way, we may first note the process of unfolding activity, hence of unfolding interests, and undoubtedly the first efforts of the child center in gaining control of sense organs and various fundamental motor co-ordinations.

It is through the instrumentality of these that an ever-widening range of interests is organized for further activities.

And as consciousness of self emerges from the early and chaotic experience so also does the social world differentiate.

And along with increased power to control movements comes a co-ordinate increase in appreciation of social value. As the sensory and motor adjustments increase in complexity, there is necessarily an increase in mediate mental processes. These mediating processes furnish the basis for vastly more numerous lines of interest and more complex ones.

Instead of resting only on the immediate output of energy, as in the earlier interests, they now find their support in indirect activities and more complex mental processes, involving more or less remote or ideal reference. Now when we consider this widening process of growth, and its periods of acceleration, and such physiological processes as the shedding of the milk teeth and the beginning of adult maturity, we have a general basis upon which to interpret the child interests.

First childhood period of interests.

It is practically agreed by investigators that the important period of childhood after infancy includes the years between two and a half and seven years.

The general characterizations during this period in the main agree. It is distinctly a play period. At the beginning the child emerges more definitely into a world of things and activities instead of mere sensations. The wholes with which the child deals, are at first emotional

ones, that is, units, which are not connected with one another for further activity, but rather complete in themselves.

At this stage the child has not learned to see in the object any reference to more than the immediate activity, which when suggested by the object or the image is performed at once. And in any given experience himself, the object, and the activity are more or less fused into a single emotional whole. The differential image has not yet had time to appear.

The images at this stage are still the summations of the values of all the activities that cluster about his contact with certain objects of interest in his environment. In course of time certain sensory elements stand out as the significant ones, as the signs by which the object comes to be known.

With the growth of an image abstract from the activity comes the possibility of play as disinct from mere impulsive expenditure of energy. Play is the interaction of the presented sense-content with the image-content of the mind. And as at first, so now, where activity is of the most absorbing interest.

Objects yet not real.

Objects, even yet, are less real to him than are the activities that they suggest. And in addition to their being the stimuli to direct activity they tend more and more to excite chains of imagery which render the activity itself richer.

This now, becomes a question of age; as he grows older, and as the development of his faculties enlarge, so the beginning of an interest in the relation of images. The strongest interests are in the real experiences of the immediate surroundings, but the child is so anxious to connect and relate his experiences that it is easy to turn him off into the fantastical and unreal, by checking his expression of the realities surrounding him.

We cannot believe in any innate delight in regarding

things as other than they actually present themselves, except as it is an aspect of the attempt of an immature organism to gain more adequate control over the situations in which it is acting.

Interest in myth.

Much of the so-called interest in myth and fairy-tale can be explained in this fashion as induced phenomena, and not necessarily to the normal expression of the growing child. He will construct his own myths for the same purpose. To him they are not pretense, but better ways of getting at things. His myth-making is not a result of his savage ancestry, but rather of the fact that he has an undeveloped mind, and undeveloped minds have pretty definite ways of reacting, whether their possessors be children of the civilized or savages.

Imitation most important.

Imitation at this period of the child's life plays a most important part. The activities of older people help to define the child's images, and the mere definition of the image on attempt to carry it out openly. This is, above all, the age for mimic plays or reproductions of all sorts of simple social activities—"Monkey sees monkey does." And this should not be overlooked, it is a formative period of the child's mind and actions.

The age of disparity of image and reality.

As the more definite working out of the images, so the consciousness of the disparity of images and activities grow. This disparity is apt to arouse two very different sorts of interests in the objective world.

In one case it may cause depression. The consciousness of his inability to realize his images, may inhibit all activity; and interest in every thing be lost, then the child settles down and takes on the "humdrum" world as it is. Nothing can be more unfortunate for the future of the child than this early check to his ambition.

The other type of child realizes the disparity as keenly, but offsets it by an ideal world of his own construc-

tion, within which he realizes himself completely. Both attitudes are unfortunate, yet few children escape one or the other in this transitional period.

A fair degree of control in a narrow sphere is attained by the normal child in the first four or six years. That is, he becomes master of many motor reactions and sense adjustments. He understands many simple duties and obligations in his home. And, if he has had wise training, his faculties are well adjusted to the requirements of the social group within which he moves.

But during this age the consciousness of a broader field is thrust upon him—a field to which he has not yet become adjusted. It may be said, that he has now reached the first culmination in the development of his psycho-physical co-ordination. He is master of only the larger bodily movements. The finer adjustments which make a complete interaction possible with the minute details of his environment have not yet been acquired.

It is apparent that the child's interest largely depends upon the adequacy with which he at different periods is able to co-ordinate himself with the elements appearing in his conscious environment.

The inability of the child, at this time to grasp and be interested in any large wholes, is seen in the fact that children of this age, in telling what they wish to become when grown up, always name some prominent detail in adult activity of their immediate environment, not the occupation as such. For example, a little boy who wishes to become a blacksmith, will say he wants to shoe horses. A little girl who wishes to become a housekeeper will say, that she wishes to sweep, wash dishes, etc. This of course, is due to the inability to make abstractions at this age. The point is that it is the striking detail, not its sitting, that of interest. Another illustration we may notice which is quite characteristic from about three to eight years of age.

Illustration of immaturity in the child.

The collecting instinct, if the child collects articles they are usually of miscellaneous and trivial value or attractiveness—broken dishes, spools, etc. Things easily handled, and regardless of value or attractiveness. The desires are crude and groping; the collections are scrappy and not purposeful in the adult sense.

We notice that the emphasis is always on the activity, and seldom does the object as such intrude, hence the symbolism and play, the lack of regard for ends to be obtained in play, and the absorption of energy in the mere response. True, the child at this age has definite general ideas, but they are narrow, and they are in accordance with the limits of his environment.

From the standpoint of control we note their every activity assists in the fixing of the free use of the body. Things are handled and looked at, and the activities of the elders are imitated, not for their own value, but because they furnish simple stimulation.

Second period of childhood.

The general characteristics of what may be put down as the second period of childhood; seven to nine years of age, is one of rather slow-physical development.

The energy during this period is probably being consumed in effecting the finer motor as well as mental adjustments that are eventually to be correlated with the rapidly elaborating ideational centers of the cortex (external).

This, then, is the beginning of the interest in details.

The interest of skill is now becoming important in the child-consciousness.

His interest in the broader environment expands coordinately with increased complexity of the psycho-physical organism and consequently increased possibility of interaction of the various elements that make up his characteristic self.

At this period the interests begin to shift from the acts themselves to the results that are to be achieved.

The elements of success now become a prominent feature in determining interests. The child is now more than at any other period unwilling to do even a simple thing, unless he feels sure of a successful issue. His activities are now directed toward ends that are regarded as definitely his own.

Games and play interests.

With most children at this age, games are individual activity, incoherent and lacking in adjustment. There are some group games at eight and nine years of age, but they are unstable ones.

The imitative games continue prominent till about ten years in boys, and eleven in girls. And such games are more common with girls than with boys.

Interest in running games with boys is high from the first, and continues without much variation. The girls' interest in running games is always below that of boys, and rapidly declines after the eighth year.

The child's new world.

The child now rapidly comes to the consciousness of a new world, requiring a radical change in his adjustments of both—physical and psychical. All the characteristics noted can easily be the result of such condition. His activities no longer flow immediately from the image, regardless of whether it reaches its end or not. But with the end definitely realized as a thing to be achieved, the child soon acquires the attitude that activity as such, is no longer in itself satisfactory.

It has been noted by some investigators, from a study in children's inference and reasonings, that at the end of their ninth or tenth year, there is a marked increase in the logical faculty. It is at about this age that children begin to give reasons why they wish to follow such or such vocations.

It is during this period that the most rapid physical development occurs, and naturally is a time of interest of vigorous physical exercise. Studies of games and

plays now form the principal occupation of children, and unite in attributing to the period between ten and twelve years those games which afford vigorous activity.

Chief element in games.

The chief elements in the earlier games seem to be those that facilitate the development of motor co-ordinations and sense judgment. Later, after the tenth or twelfth year the games are calculated to give scope and depth to the previously acquired co-ordinations.

The years between ten and thirteen are by many, regarded as a time in which reserve power is being stored up for the rapid growth of the next few years; and probably rightly so. These activities and interests, naturally are both the means by which energy is stored up, as well as proof of its presence.

One of the chief problems during all these years, is to find ideas or images adequate to furnish direction for the energy—both, mental and physical, that rapidly becomes available. The interests in details of the more intricate games and workmanship arise coincidentally with the power of mental and muscular adjustments.

It is at this period of life that children begin to speak definitely of occupations they want to follow. And it is at this age that greater numbers of occupations are mentioned by each child, indicating that by this time the activity to do many things has been acquired, and that the child yields to the new-sense of power by aspiring to, and confidently expecting to engage in many vocations. In other words, he is still interested in his world in the gross. He has learned to master a few details here and there, but does not yet realize how many more there are for him in a single pursuit.

He thinks symbolically of each occupation by a few of the details of its work that he sees clearly, and from these he builds his detailed world, adding them together as so many scattered elements. His interest in detail is not, an organized and efficient one, but the beginning of

the breaking up of his undifferentiated environment.

This same attitude comes out in studies of children's drawings.

For example, at the age of six, he draws facts, and not appearances. An apple with a pin stuck through it, is represented at this age in a drawing showing the whole pin. But at eight or ten, the correct appearance is drawn, but only schematically. In general, the drawings made by children at this later age are said to be symbolic. Details, if many come in, in a tangled mixture, but generally one is fixed upon to stand for the whole individuality of the object, just as we note above in the choice of occupations, etc. In whatever they attempt they select some one element and emphasize that with all their skill. In drawings the boy or girl is represented with hat, pipe, buttons, spectacles, etc., a house with keyhole, etc. In other words "there is an undefined whole, with some one or two features alone, made real." At this time there also is a noticeable increase in profile drawings as they really appear.

Summarizing characteristics.

In summarizing the characteristics of these years it may be said that they seem to be marked off from what comes before by the greater isolation of the image from the activity, and a certain bewilderment in the midst of many activities realizable, but for which the organism is not yet adjusted. This lack of adjustment is accomplished by certain and marked emotional peculiarities, as mentioned above. On the other hand, it is to be distinguished from the immediately succeeding years by its being a period of retarded growth and hesitant attitude of mind, as compared with the intense activities and well worked out adjustments of the next years.

Interests of preadolescence.

Activities in sports of all kinds may be said to be a preadolescent phenomenon with boys. The social feelings that later form so much of the content of life, seem

to be nascent in these early associations. Group and co-operative games are a matter of course in the adolescent period of life, but here they stand out as marked characteristics, because of their very contrast with the individualism in the sport of earlier years. When co-operative games are played, before the eleventh year there is but little feeling of solidarity, the boy generally being willing to sacrifice the interest of group to his personal glorification.

Earlier interests in such games seem to be proportionate to the amount of opportunity they afford for the exhibition of personal prowess, but the preadolescent glories in the fact that it is his club, or team that has won.

Susceptibility to evil influence.

This is a marked time of susceptibility to influence of others which is another indication of the coming to consciousness of social relationships.

From about the age of twelve, boys seem to be of greatest susceptibility to evil influence—evidence of the beginning of the imperious attitude toward restraint that is so prominent during these years. The indications here point to a beginning of definitely directed lines of interest. As for instance, at this time the boy does not depend almost exclusively on finding objects or having them given to him for his collections.

Trading for them becomes now a well recognized and important means of building up his collections and ownership of things, another evidence of the rise of social consciousness.

This trading instinct continues quite to be forcible from the eleventh to the fifteenth year. And it is not until well into the adolescent period that he becomes in any sense scientific.

Girls' preference for occupation.

Girls show fewer definite preferences for many different occupations at eleven or twelve than at nine. At thirteen or more, girls wish to be dressmakers and milliners more

than before, more even than wish to be teachers, which vocation has hitherto been in most favor.

Then at about twelve there is a period of uncertainty corresponding to the previous one of about eight to ten, but, on an entirely different level.

Then it was due to the disparity between image and motor adjustment. Now it is rather due to the felt disparity of the self with the complex social situation, or to state it in terms parallel to those first used, the disparity between images of social values and mental adjustment necessary to their actual assimilation.

This point may be further illustrated in the studies in the choice of vocations. From the twelfth year, there is a rapid decrease in error, indicating a marked virility of mind, that should be correlated with the rapid growth, of the child.

The social instinct, clubs, etc.

The social instinct then, is further indicated by the fact that the period of ten to thirteen is the one for the formation of secret associates and clubs.

Naturally, however, the basis on which they are formed are different from the association of adult life. The child's dominant interest at the time furnish the ground from which he comes to consciousness of the need of co-operation with his fellow. And these dominant interests are without doubt in the sphere of physical activity and eagerness for adventure.

Hence, of boys' clubs and societies by far the majority are athletic or predatory. From the intellectual side, it is noteworthy that this is also the age of puzzle interest which reaches its height at about the twelfth year; and by some is regarded as a prepubertal phenomenon.

At this age, there is a certain equilibrium, and superabundance of energy, which may be expended in intellectual play before the more serious intellectual problems of adolescence are taken up.

This interest in play, and in puzzles then, is an evi-

dence of mental freedom, a broadening of self and breaking away from the narrowness of childhood.

In this manner then, we see the co-ordinations on the intellectual side worked out at twelve to thirteen as they were on the physical side at about nine or ten, and the characteristic play attitude we have in each period.

Interest development corresponds with that of personality.

The development of interests corresponds to the development of personality. From our discussion of the periods of childhood from seven to thirteen, the characteristic interests and dispositions of the beginning and close of the periods, that each is a transition time, and the child's attitude of mind, is in a sense, the same in each. The facts we selected, bring out the analogous character of these periods, and accentuate their differences. We notice that much of mental and physical matter relating to these years can be centralized positively or negatively about susceptibility to, or imitation of things in the immediate environment.

Period of greatest susceptibility.

The period of greatest susceptibility to imitation and suggestion as recognized is during about the tenth year. The child of seven or eight tends to imitate specific acts. He does not generalize in his imitation and so gets back of the act to the attitude prompting it; neither does he seek to imitate the larger whole of which the act is a part. The same susceptibility, but on a higher plane, appears in girls from eleven to seventeen and in boys from their twelfth to eighteenth year; and this is the period of greatest openness to moral influence by parent, teacher, friend or foe, in girls culminate at fourteen and in boys at about sixteen.

According to the best information, the disposition to imitate is determinative of the direction of ambition. Hence, at about nine, sixty-eight per cent of the girls wish to be teachers, while only thirty per cent aim to be dress-

makers, and only ten per cent stenographers. Clearly this is due to the teacher being the most prominent factor of so many girls, environment during the school-age.

Likewise boys, up to the age of ten or eleven, the reacting to the elements which impress most, aspire to become firemen, engineers and policemen. About thirty-five per cent choosing the father's occupation. At about thirteen boys show a tendency to choose the father's occupation.

As will be seen from the foregoing, the mental attitude that is at the bottom of this second tendency is analogous to that of the earlier period, under parallel occurrences. At first due to uncertainty and bewilderment felt on coming into touch with the broader world of things and ends to be worked toward. In the latter case, the same uncertainty arises as the boy becomes conscious of the complexity of the duties involved in any one vocation, and his own inadequacy. At first, he was confused by the breaking up of the entire environment; now it is by the breaking up of the particular units in the environment.

Other sex differences and interests.

Boys have a few intensely popular games that surpass all others, while with girls there are a large number of games of almost equal popularity, none that compare in popularity with baseball or football. This perhaps is not a phenomenon due to the girls' restricted opportunities, and lack of suitable games for them to enter into in large numbers.

Mr. Barnes in study of children's ideals. We note that girls are more ready and willing to answer the questions and give reason for preference than boys. This may mean that girls have greater ability to express themselves, or that they are more suggestible than boys. But, the more probable reason may be the fact that girls talk more than boys, "practice excites proficiency."

Mental tests.

In the mental tests there seems less irregularity in girls' curves of success

and error than in boys; this would confirm much of the evidence from various sources that the interests of girls unfold more regularly than do boys, but do not extend so far.

To some extent at least, the athletic club of boys are replaced by musical, social and literary organization with girls, but usually at a later age. And during the period when boys are most active in these institutional activities girls do almost nothing of the kind.

As to superstitious beliefs, girls are found to have more superstitious beliefs than boys. A marked peculiarity of all such beliefs in their personal character, that is, the tendency for each individual to have his own peculiar belief. And by far the largest number of superstitions are mentioned by only one child.

This seems especially true with boys, and it seems to be so, because boys are less social than girls. This may be due to the fact that boys display more initiative and individuality than girls, and from this reason less under the influence of social suggestion, while being still keenly social in their activities.

Superstitions in children.

Girls have many superstitions in love-lore, while boys do not, which points to a fundamental emotional difference in the sexes. Boys, having the more active part to play, take things into their own hands, while girls for much the same reason as primitive man, resort to magic.

In tests as to children's sense of the practical, boys seem to be ahead of girls. Girls' pleasures after twelve seem to be more subjective and less common than is the case with boys. The boy lives in a wider world; his pleasures are those of other boys.

As to dress, with boys the desire to dress well, appears markedly from twelve to sixteen, but this seems to be merely an element of the broader sex-consciousness. With girls this is much more definitely conscious and is rather an expression of taste, and individuality.

The emotional accompaniments of the various periods of childhood, of course, vary widely.

And the transition periods of eight and nine, and twelve and thirteen, seem to be times of some emotional instability.

Boys in general, are more active, intense and overt; girls more diffuse, subjective and medium in likes and dislikes.

The moral ideals of boys at the age of ten are negative rather than positive, that is, the fragments of adult morality that they have imbibed are this sort. For instance, they wish to avoid bad habits, reflections of their exemplary life and moral teaching.

Girls, on the other hand, express as their highest desire the being good to others.

CHAPTER CVII.

PSYCHOLOGY OF MENTAL, MORAL AND PHYSICAL TRAINING.

THIS department of our work could hardly be considered complete without a short discussion of the psychology of child training.

Child study of mental and physical development, is a prerequisite for successful mental, moral and physical training.

It is wonderful what results can be attained by mental powers on physical development.

The career of the child will be that which he has acquired by training, and in the main, this depends upon the training he receives during infancy and early childhood, moral, physical and social.

For example, the motherly girls and the many boys showing comprehension more clearly than others of the same age, due to more attention and sedate environment. This may in part be naturally due to superior development of mind and perfect normal build of body; but as

a rule, these characteristics are the results of early training.

In many cases this has been unintentional but none the less effective.

An example. For instance, the first child receives much attention, its mind is called to action through the various little talks of the mother and father. The mother calls its attention to herself, smiles, holds up her finger and commands the little fellow to watch the movements of the hand, talks to infant, although it does not realize any meaning, it is attracted, opens its eyes widely and begins to show emotions of interest in these motions, and in these talks of the mother, in fact later on it strains its mental faculties to emotional gestures, etc. The parent lets it place its fingers and hand around a finger, and makes some traction.

All these things tend in very early infancy to develop mental, physical and psychic emotions and activities. Later on, after the sixth month of age, it begins to notice a few things especially the motions of the mother's lips, eyes, hands, etc. Seemingly beginning to show an emotional interest in things placed in its hands, and in the movements of those who toy with its hands, etc.

In other words, it begins to make use of emotional impulses, and these are stimulated by means of motions of the mother's eyes, lips and words spoken to attract and enliven its impulsive nature.

Continuing as the child grows, its emotional characteristics and interests develop.

It is during this period of infant life—if not so much before, but after the sixth month, that much can be accomplished to develop the intellectual as well as the physical qualities of the child.

His psychic tendencies at this age may be elevated or depressed almost at the will of the parents and through its environments.

The infant in a measure is during these periods of

its early life, trained, and its propensities are developed, although perhaps, unintentionally, to fix, not only its moral, but also the physical nature of childhood and adult life.

Impulsive nature.

Influences brought to the child's impulsive nature, cause a development of those elements which are thus attracted and induced into reaction. So parents should study their child, its activities and impulses, and so learn the need of faculties, which need special attention, and perhaps development.

Again, an infant who is listless, he will not react on suggestions, or pay any attention to smiles from his mother, etc. If this be due to non-development, such deficiencies may later on develop without special attention. But, on the other hand, that may denote slight organic or physical deficiency, and unless it is exercised will always remain deficient, if not artificially trained and developed.

This may be accomplished by various means of attraction. The mother may arouse his impulse by talking to him, by touching her finger to his nose, lips or cheeks, at the same time trying to attract his visual attention. This mode of exercise several times during the day, will finally develop his faculties and emotional interest, and so amend the deficiency.

However, if it is found that the child will not or cannot respond to such stimuli—it may be well not to let him feel his deficiency more than necessary. He should not be tantalized because that may instead of stimulation provoke disgust and lack of courage for further effort on his part.

Such children should be kept out of school until such time when interest to study begins to develop.

DEVELOPMENT OF EMOTIONAL AND INTELLECTUAL POWERS.

We are told that not only can the child's temperament and social manners be trained, but also its very physical powers and intellectualism may be developed or retarded;

all depending on the care and training the child may receive.

To illustrate this in detail would lead us to a more elaborate discussion than the space allotted for this work; and is really not necessary. Suffice it, that we deal with some of the principal attributes that are of prime importance to the human family; and include these phenomena.

That should be sufficient to show its truth and importance for parents and their children.

Development of Affection and Love.

Affection and love in a child may be cultivated even with more definiteness than most any other attribute; and carry with it, one of the most important qualities of the human family.

Even in the earliest infancy this may be developed by kind and affectionate caresses and endearments in various ways. Kindness begets kindness, affectionateness begets affection and the rooting of it into the very nature of the individual is nowhere so effective as in infancy and early childhood.

Foundation of affection, love and charity.

And, let it be said, that rarely there is an affectionate man or woman who has not been trained to be so in his or her early childhood, and ordinarily that is the foundation for reverence, sympathy and charity.

Although the infant is not conscious, and cannot know what the kind and sweet words, the tender expressions of the mother mean, this cultivates its faculties to smiles and kind impulses.

Hence, if the infant is well cared for, its wants constantly provided before it cries or shows any of the ill impulses, then these will develop and become stronger while those of its irritable nature will remain in the background.

Then later on when the intellectual emotions develop, when he begins to develop his mental impulses and interests, when he in addition perceives kind handling and friendly demeanor from the mother, nurse and other elders, all this not only permits the continuance of affection and love, but cultivates and develops his faculties of friendliness and quietness.

This manner of care and training being continued develops his mental attributes as the physical power grows. On the other hand, if the infant is neglected, if it is permitted to cry for its needs and wants, it develops anger, impatience and everything adverse to affectionateness and love.

Hence, the crying, selfish, and ill-tempered infant and child, and as a matter of course adult.

Because the early habits will rarely leave the nature of the child.

The child's way is laid for its life—only in rare cases will an ill-bred child develop into a well-bred adult.

DEVELOPMENT OF CHILD MORALITY.

Again, we are told this or that attribute, or this or that habit is born into the nature of that child, etc. But, we know that is not so. True there are natural qualities more fully developed in one child than in another. Tendencies and developments of faculties are not alike in any two children.

But, as a rule, all faculties are subject to training and development, of course in one child more so than another.

Much depends upon the development and health of the child. It is difficult to train a sick baby, it is irritable, much as is the adult in ill health.

But with rare exception the child will be as he is reared. In other words, the child is not as he was born, but rather as he was reared.

Who can point to a good boy or girl who had not good training?

In other words, if we want good children, good men and women, we must train them to be so, and that should begin with the first hours of their life.

Child immorality as such cannot well be traced to early infancy, but often to later infancy and early childhood. Of course not conscious immorality, but the seed for immorality is frequently sown in very early life. Morality in children is not altogether analogous to that of the adult, because of their immature development of consciousness.

But, the paving of the way to morality or to immorality begins often with later infancy and early childhood.

The morality here in mind.

The morality here in mind includes everything contained in the meaning of the word "Morality," because all kinds and phases have their basis primarily in the early training and environments of the development, the development of impulses and consciousness of the child. If the child is reminded that this or that is naughty and is exemplified by its environments that its elders so regard it, he will by force of habit regard it as his measure of moral value, and that so to say, grows into his very nature.

This holds good in so far as the impulses for anger, impatience, jealousy, selfishness, covetousness, greed, telling untruths, etc., are concerned.

As to sexual immorality, that may also develop in early childhood, of course not consciously in very early childhood, but by careless habits and bad environments. All of which is discussed more fully in other chapters of this work.

The child which is permitted to indulge in these ill habits, develops them, and they become part of its nature.

A child which is permitted to retain playthings which belong to his playmates, etc., paves the way to steal. A child which is not trained to control his passions, will not control them in later life.

In other words, the child which has learned from earliest childhood to control his will, and his passions, is in fair way to a moral life in all things.

DEVELOPMENT OF CHILD HUMILITY.

This may with some readers call for a smile.

The idea that the child may be trained to be humble may seem foreign to many.

Nevertheless this as all other attributes to morality has its origin in early childhood.

Pride is one of the first habits of ill-breeding that the child acquires, and that begins shortly after the development of self-consciousness, and is due to early mental impulses that need checking.

This leads to a habit of lying, anger, quarrel, etc. To further illustrate this we call attention to the case of a boy of four, who hears his father tell this boy's uncle what an excellent memory he has for his age; he alluding to some things this boy had related. This aroused the boy's pride, if that is what one would call it, so that he at once began to relate other circumstances along the same line. This if properly tempered may not be harmful, or even tend to strengthen and develop his mental faculties. But that depends upon the kind of praises which may be used as right training. But, as in the case of this boy, that developed into pride and story telling—a habit hard to conquer.

The child who is trained by word and by environment that he is only as God has made him, that humility is a great virtue, will develop in strength, wisdom and esteem.

DEVELOPMENT OF OBEDIENCE AND REVERENCE.

Obedience is one of the greatest virtues in children, as well as in the adult. Obedience and esteem for authority is the basis of all good government, whether of the Family or of the Land.

Obedience may of course be understood from two points of view. One by means of force and fear, the other by virtue of training and consciousness.

The attribute of conscious obedience has its origin, as a rule, in early infancy, from the very hour of the birth of the child.

To elaborate on the virtue of obedience of children would require a book for this alone.

The happiness of the Family and of the State, virtually depend upon obedience. The obedient child, youth, adult, citizen.

How to cultivate this in the child should be the primary and constant aim and study of every parent.

Reverence in the child.

Awe, obedience, and reverence, though closely allied are entirely different in their application.

Awe is produced by the loudness of thunder, the vividness of lightning, the raging of the storm. Reverence is taught through the contemplation of the Creator, who causes and controls these powerful phenomena.

In some like manner the father and mother, who to the infant child are all-powerful, so big, so strong, so good, so wonderful, in being able to supply all of its needs and give it protection.

Hence that awe and reverence of the greatness displayed, reacts on the child's impulse and mental development, and as the child grows under good training the reverence will outlive the awesome, and becomes the product of consciousness. The boy and girl so trained will develop reverence for their parents, their elders and they revere their Creator, whom they have learned to be all powerful, all pitiful, all love and justice. This then is reverence; and is by such children rendered to authority, their elders and superiors. These are virtues the development of which are inestimable to the child, the parents and the social world. For detail in training see chapter on training of children.

DEVELOPMENT OF CLEANLINESS IN CHILDREN.

This we are told is an heirdom, "it is born in that child to be careless and slovenly," that is not so. It is as it was trained!

An infant soon learns that cleanliness induces comfort, but neglect and uncleanliness from the first also becomes natural to him and, so to speak, becomes part of his nature.

The infant which from the beginning is not neglected when its linens become soiled, by instinct feels the comfort that induces, and soon feels the discomfort of uncleanliness and so develops the sense of discomfort, or comfort, which is, so to say, impregnated into its nature; it will be the physical and intellectual nature of the child as acquired during infancy; it becomes a conscious habit to be clean or unclean, not born, but trained into the very nature of the child.

So with all virtues, so with all attributes in life, they are as they were trained and developed in early life.

CHAPTER CVIII.

OLD AND YOUNG—LESSONS WE SHOULD NOT FORGET.

MANY times we wonder how it is that people treat one another with rudeness. This especially applies to parents, and children who are grown up.

Parents at times observe faults in their children and cannot get along peaceably with them, their ways do not suit their views or ideas, forgetting that once they were young, and fail to realize that there was a time in their own life when they would resent having their elders interfering with them or their plans.

Look back, Oh fathers and mothers! There was a time in days past when you wanted to "be your own

boss.'' For the time, just for a time, reverse the position and standing, and you will not insist on the adoption of your old or self-settled devices, customs, etc. These same old people do not realize that their advice to the young husband or young man, young wife or young lady, is a command; they conclude that when they give them an idea, they should immediately accept and follow it, and when the young people do not so act, then the elderly are offended and think their ideas are set aside, and their experience and gray hair is to the young people of no value.

Elders to overcome difficulties with the young.

These fathers, fathers-in-law, mothers, mothers-in-law, could overcome all these little occurrences if they would remember their own time, in the bygone of long ago, when they themselves would not let such dictate to them as to the better way of housekeeping, etc.

Overcome difficulties with the elders.

On the other hand, young people could overcome most of these difficulties if they be considerate and patient with their elders; show them that they do not resent their good offices, and when they do not feel that these good and well-meaning advices are suitable to them, decline their adoption with due respect and gentleness, explaining that they suit their taste, but not their own.

At any rate, the old should remember that they were once young and that the times progress, and customs change.

Lesson for the young.

And the young should take the lesson at this time, and so learn to forbear, remembering one day they will be fathers and mothers of young married people, and, that these experiences shall supply them the lesson that they shall not treat their children as these good old fogies are now doing, and treating us.

By this as a prospective, they will prepare themselves to be happy old people, and the means of obtaining for

their children a cheerful happiness.

That some day they will be similarly placed and reflection will cause a broadening of views, productive of harmony in the household conducive to the happiness of all, fulfilling the apostolic injunction "Be courteous."

CHAPTER CIX.

CARELESSNESS.

CARELESSNESS is one of the worst and most insidious enemies of the human race. It is nearly always due to carelessness on the part of parents that their children do not turn out well.

It is through careless parents that their children do not receive proper training. It is due to want of thought that children are not taught how to eat and drink; to the want of such supervision the cause of many of the sickly children may be traced.

And it is through carelessness that children are allowed to mingle with bad company and so lose what training they did receive.

It is through carelessness that parents do not acquire the necessary knowledge, so they are fitted to teach their children the essentials of life, the principles of hygiene and sociology included.

And from the worldly as well as from the spiritual point of view let us quote from Geo. W. Burr as follows:

I am powerful.

"I am more powerful than the combined armies of the world.

"I have destroyed more men than all the wars of the world.

"I am more deadly than bullets and I have wrecked more homes than the mightiest of siege guns. I steal, in the United States alone, over $300,000,000 each year.

"I spare no one, and find my victims among the rich and the poor alike; the young and the old, the strong and the weak, widows and orphans know me.

"I loom up to such proportions that I cast my shadow over every field of labor from the turning of the grindstone to the moving of every train.

"I am relentless. I am everywhere, in home, on the street, in the factory, at railroad crossings, and on the sea.

"I bring sickness, degradation and death, and yet few seek to avoid me.

"I destroy, crush or maim; I give nothing but take all.

"I am your worst enemy.

"I am Carelessness."

CHAPTER CX.

Why Be a Criminal?

WHY be brought before a criminal court? Is it reasonable that any man or woman break the criminal or any other law?

With our good sense and use of good judgment no man or woman should need watching nor be caught in crime of any kind.

One who uses his or her faculties and means well should not need correction much less be punished by the law of the land. Everyone has not only the knowledge of what is right or wrong, but also the moral strength to overcome temptation. All one needs to do, is to make use of his or her own power of self-control.

It makes one shudder to see how people, who lay claim to civilization, are arrested and taken to jail, etc.

Why is that?

(Certainly because they are careless, selfish, criminal, or lack civility to that extent.)

These lines are written for the purpose of calling attention to a few vital facts and thought, for the purpose of reminding parents, that these thoughts and facts may be instilled in the minds of their children as they

grow up and so steer clear of ever having to reckon with criminality.

How may this be done to the best advantage?

To deal with this subject in detail would require a volume in itself. Suffice to say that fathers and mothers, by giving the subject close consideration, can form their own methods of inculcating these virtues into the character of their children.

To be sure—as in all other training, as in all other virtues, there are a few most important points to be remembered.

Example of the parents, diligent representation and illustration of criminal life and its consequences. Be just and demand justice for one another. Ample instruction, a religious, just life, and last but not least, there are two virtues that are of vital importance. Self-control, respect for one another's rights, and due respect for authority.

Teach the child to do to others as he would be done by, and be sure not to encroach upon others' rights.

CHAPTER CXI.

THE DIVORCE EVIL.

THE object of this chapter is to more clearly and forcibly set forth some of the principal evils and consequences of divorce.

This, as they appear, not only from the moral, religious, and social aspect, but also from the civil, hygienic, and physiological viewpoint.

Only those who mingle with the people of the world, those who come in contact with those that are afflicted with this evil; the family, and the children of the divorcees, can have insight, a practical and full knowledge of the misery and degradation that divorce brings to the human race.

The demoralizing effect upon society following divorce is simply indescribable.

Those who give these matters proper thought and understand these things readily, see the soundness of marriage, and continuity of the marriage bond.

The family being the nucleus—the foundation of sound and stable government, it is but natural that its desecration is followed by demoralization of society.

It is for these and many other good reasons that we should dwell upon these phenomena most seriously. Nature, as has been stated, demands that the marriage bond is insoluble. This being so, indicates that this state of life be entered with forethought and greatest care.

It is the careless or indifferent courtship that is to blame for many divorces. The whole future, not only of the couple to be married, but also their offspring is dependent upon whether or not the married life of that couple is a success.

The human is so constituted that he requires the care of a father and a mother; not for a few months or a year, but for a period of many years—until maturity—yes and then some.

The human race is so constituted, that it requires a husband and wife, to constitute a home—a family—and that there is no other means by which children are naturally and equitably reared; and that is not all: Nature has constituted man and woman so, that the married need one another during their life, after their children have been reared and grown up.

When we study humanity do we see anything in human life that is plainer than this? We need only observe the depravity among so many of the divorced people and their children.

What becomes of many such children?

Orphans, and yet, both parents living. Children set adrift: at best they are step-children—reminded at every move and thought of the once (or should have been)

happy home, where no one but the real father and the real mother and themselves constituted the family.

The knowledge of the bonds which were to insure the little kingdom insoluble, has been ruthlessly broken, father and mother both married again.

What an example; how can these children be expected to have respect for parents, or for civility? What regard for Christian teaching and Christian life?

Moreover, what becomes of so many of such divorcees? Is it not from amongst these that many of the brothels are supplied?

Again, among the rooming houses occupied by grass-widows and some with their children—a new friend every now and then. Can such children be brought up innocent? Or, have we a right to think such are not wise enough to notice what is going on?

What may be expected of such conduct? In short, divorce as a whole is not for the best of the race; but in the main it is one of the greatest breeders of discord, immorality, disease and crime.

The main cause of the divorce may be ascribed to loose or indifferent courtship and disregard for the marriage bond.

MORE HOMES BROKEN THAN BUILT UP.

Homes broken up.

While many excellent people are divorced and some of them make new homes, the inevitable trend of divorce is to break up many more homes than it builds up, and not only tends to materially reduce the number of children, but creates homeless and waywards of those already born.

When marriage is dissolved the true home ceases to exist; the parents and the children are separated, and the sweet ties that bind father and mother to their offspring and to each other are broken forever.

"As long as the Romans of old looked upon marriage as sacred, and held the sanctity of the home inviolate, their arms were invulnerable, and Rome became mistress of the world. But, with the accumulation of colossal wealth came great laxity of morals; marriage became a jest, and childbearing a useless burden.

"The luxurious Romans lost all respect for female chastity; the heroic virtues of their early years were forgotten and the empire fell the victim of luxury and disregard for the binding effects of marriage."

"One of the chief contributors to delinquency that keeps the state prison filled to its capacity" declared a state board of corrections in its biennial report to the governor, "are the divorce courts." "We wish to emphasize," declared the board's statement, mentioning divorce as one of "the leading factor that enters into the crime record of the state, is the lamentable influence of unhappy family life, with divorce and separations leaving helpless children to be creatures of the street and eventually wards of the state."

CHAPTER CXII.

Conclusion.

TRUE civilization and happiness in this world as we observe from the foregoing discussions, after all is founded in the observance of the laws of our Creator; the laws of nature.

When then should we believe in God; the Scientist as well as the Theologist?

Because they depend upon one another, God being the Creator and Author of all things, science, reason and all that man is endowed with, is from his Creator.

Religion, the teaching of the Church, therefore is the foundation upon which all civilization and happiness in this world rests. It is unquestionable that:

Anything that is not good, anything that is not in harmony with true religion, is not in harmony with science, physiology nor with sound reasoning.

These maxims are the only ways to true happiness in married life and true civilization.

Some say, we need no religion, no church nor faith in a God to be civil, happy and good citizens.

Is that so?

Everything in nature tells us it is not. Our senses, our reason tells us it is not.

The voice of conscience within us tells us that we are here on earth to worship a Supreme Being.

All true history tells us that without religion the human race has at all times fallen into barbarism and savagery.

All true history shows that the Christian Church is the author of all the real civilization there is in the world today.

To point to only a few of these facts would require

a book; but let us call attention to the fact that the church, more especially the Christian Church has raised women from a state of mere chattels to a state of equality with men. The Christian Church has abrogated slavery and imprinted upon the world for the first time the maxim that all men are born equal.

Therefore, if we love true happiness in this world, if we would live a truely reasonable life; we will stand on the side of faith, and obedience to the law of nature, and that law is the law of God; which we must obey, if we would obtain the best this world offers in life.

From this then, we must conclude that married life, in all its phases should be based upon the law of God, the Creator of mankind—of marriage itself.

CHAPTER CXIII.

APPENDIX—PROVERBS AND SAYINGS OF NOTED MEN—WE MUST HAVE A GUIDE.

"Whether traveling over continent or through a field of thought, erecting a mansion, or developing a high moral character, whoever would keep his bearing and work forward to an important end, must have a guide."

"A careful study of children will gradually reveal to the teacher what is probably capable of development."

"The childhood of today
Is the manhood of tomorrow,
The childhood of today
Is the manhood of yesterday." —*German.*

"Compassionate mothers bring up scabby daughters."—*German.*

"Choose cloth by its edge, a wife by her mother."—*Persian.*

"There is no mother so wicked but that she desires her child brought up to be good."

"It is not as thy mother says, but as thy neighbors say."—*Hebrew.*

"Every mother's child is beautiful."—*German.*

"When the children are small they tread upon the mother's lap;
When they are grown they tread upon the mother's heart."
—*German.*

"There is nothing more charming than a mother with her child in her arms, and there is nothing more venerable than a mother among a number of her children."—*Goethe.*

"Though a mother be a wolf, she does not eat her cub's flesh."—*Afghan.*

"You desire, O Women, to be loved ardently and forever, until death; be the mothers of your children."—*Jean Paul.*

"A father will more readily support ten children, than ten children one father."—*German.*

"Happy is he that is happy in his children,"
"He is a wise child that knows his own father."—*Anon.*

"He that marries a widow and three children marries four thieves."—*Spanish.*

"He that hath a wife and children hath given hostages to fortune; for they are impediments to great enterprises, either of virtue or mischief."—*Bacon.*

"He was scant of news that told that his father was hanged."—*Scotch.*

"It is a wise father that knows his own child."—*Shakespeare.*

"He who hath but one hog makes him fat, he who hath but one son makes him a fool."—*Italian.*

"Like father like son."—*Arabic.*

"One can see by the child, what sort of a father he has."—*German.*

"The fathers have eaten sour grapes, and the children's teeth are set on edge."—*Bible.*

"The words that a father speaks to his children in the privacy of home are not heard by the world, but, as in whispering-galleries, they are clearly heard at the end and by posterity."—*Jean Paul.*

"To a father who is growing old there is nothing dearer than a daughter."—*Euripides.*

"The glory of children are their fathers."—*Bible.*

"Who so wishes to live without trouble, let him keep from step-children, and winter hogs."—*Low German.*

"A man at five may be a fool at fifteen."

"A man at sixteen will prove a child at sixty."

"From clever children come fools."—*German.*

"Childhood and youth see all the world in persons."—*Emerson.*

"In childhood be modest, in youth temperate, in manhood just, and in old age prudent."—*Socrates.*

"Childhood shows the man as morning shows the day."—*Milton.*

"Education begins its work with the first breath of life."—*Jean Paul.*

"Education commences at the mother's knees, and every word spoken within the hearing of the little children tends toward the promotion of character."—*Patton.*

"Let thy child's first lesson be obedience, and the second will be what thou wilt."—*Franklin.*

"Rather unbred than ill-bred children."—*German.*

"Men are generally more careful of the breed of their horses and dogs than of their children."—*W. Penn.*

"More children more luck."—*German.*

"One chick keeps a hen busy."

"The girl herself is the smallest part of herself."—*Ovid.*

"He who loves well chastises well."—*French.*

"He who spares the rod, hateth his child."—*Latin.*

"Teach your child poetry, it opens the mind, lends grace to wisdom, and makes the heroic virtues hereditary."—*Mahomet.*

"Keep a tight rein over your son."—*French.*

"The boy's will is the wind's will."—*Spanish.*

"The child says nothing but what he heard at the fireside."

"The right law of education is that you take the best pains with the best material."—*Ruskin.*

"The time of breeding is the time of doing children good."—*Geo. Herbert.*

"They who educate children well are more to be honored than

they who produce them; these gave them life only, those the art of well-living."—*Aristotle.*

"To endure is the first and most necessary lesson a child has to learn."—*Rousseau.*

"Unbred children act like animals."—*German.*

"We ought not teach children the sciences, but give them a taste for them."—*Rousseau.*

"Eat regular meals. Eat slowly and chew thoroughly. Never eat too much. Never hurry after eating. Drink plenty of water. Drink a tumbler full of water at bedtime. Never eat for pleasure."

"The strongest man is he who loses not self-control, though he be foully wronged."—*Menander.*

"Evil has many shapes, good but one."—*Aristotle.*

"We need the ministration of Physicians in sickness, of Friends in sorrow."—*Socrates.*

"Let not thy wrath against events be roused."—*Euripides.*

"Envy is an ulcer of the soul."—*Socrates.*

"Other men live to eat, but I eat to live."

" 'Tis not a flow of words that proves good judgment."—*Hale.*

"He knew nothing, except this one thing, he knew nothing."—*Socrates.*

"The man who does the most makes the most mistakes."—*Euripides.*

"He who has the fewest wants is nearest to the gods."—*Socrates.*

"The speaker's character persuades, not his words."—*Menander.*

Should this be remembered by parents and teachers?

"Naught is more dear to children than their mother. Sons, love your mother, for there is no love more pure, more sweet."—*Euripides.*

"We ought to behave to one another, as to avoid making enemies, of our friends, and at the same time to make friends, of our enemies."—*Socrates.*

"He that is fallen cannot help him that is down."—*Geo. Herbert.*

"He that hath children, all his morsels are not his own."—*Geo. Herbert.*

"What gift has Providence bestowed on man that is so dear to him as his children?"—*Cicero.*

"The shortest life is long enough if it lead to a better, and the longest life is too short if it do not."—*Colton.*

"That you may be beloved be amiable."—*Ovid.*

"The reason why so few marriages are happy, is because young ladies spend their time making nets, not in making cages."—*Swift.*

"Of earthly goods the best is a good wife. A bad the bitterest curse of human life."—*Simonides.*

"A fortune in a woman is better than a fortune with one."—*Herbert.*

"God, the best maker of all marriages."—*Shakespeare.*

"It does not appear essential that in forming matrimonial

alliances, there should be on each side a parity of wealth; but that in disposition and manner they should be alike. Chastity and modesty form the best dowry a parent can bestow."—*Terence.*

"When a maiden is too forward, her admirer deems it time to draw back."—*Geo. Herbert.*

"For nothing lovlier can be found in woman, than to study household, and good works in her husband to promote."—*Milton.*

"She seeth well to the ways of her household."—*Solomon.*

"She who never answers till a husband cools.
Or if she rules him, never shows she rules,
Charms by accepting, by submitting sways,
Yet has her humor most, when she obeys."

—*Shakespeare.*

Marriage Don'ts.

Don't marry for good looks; it is only skin deep and as unreliable as March weather, or as a weather prophet, says a writer.

Don't marry reputation; it is like a worthless check, if not endorsed by good character.

Don't marry bad temper; it would soon untemper the spring of your happiness.

Don't marry in haste; it is a dangerous leap, if you attempt to jump without knowing the width of the chasm.

Don't marry to get a home; some homes are just a boarding house, whose boarders are frequent strangers to each other and remain strangers.

Don't marry money; without love, such a marriage is as stale as unsalted food.

Don't marry to reform; the failure of remaking would be your own unmaking.

Don't marry extravagance; it leads directly to poverty. A squanderer can never make both ends meet, much less overlap.

Don't marry sentiment; it is apt to fade away before the honeymoon is over, like perfumed flowers.

Don't marry until you are in sound health; else your married happiness will start out a-limping.

Don't marry to have a good time; your good time will most likely never arrive.

Don't marry a person of different religion; religion and religion, like water and oil, are hard to mix; one will try to down the other and the lighter one will invariably dominate.

Don't marry without having earnestly prayed for light and guidance from the Lord; as marriages are contracted in heaven, heaven surely should have something to say in the choice of the partnership.

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